





STATE OF IDAHO

Office of the secretary of state, Lawerence Denney CERTIFICATE OF ORGANIZATION LIMITED

LIABILITY COMPANY
Idaho Secretary of State
PO Box 83720
Poince ID 83720 0090

Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

-FILED-

File #: 0005041523

Date

Date Filed: 12/30/2022 1:47:40 AM

| Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (see descriptions below) | | Standard (filing fee \$100) | |
|--|-----------------------------|---|--|
| 1. Limited Liability Company Name | | | |
| Type of Limited Liability Company | | Limited Liability Company | |
| Entity name | | Abbrielle Lashes LLC | |
| 2. The complete street address of the princip | al office is: | | |
| Principal Office Address | | 4486 W FAIRWAY DR, 228 3000 E SELTICE WAY C | |
| | | POST FALLS, ID 83854 | |
| 3. The mailing address of the principal office | is: | | |
| Mailing Address | | 4486 W FAIRWAY DR | |
| | | APT 228 COEUR D ALENE, ID 83815-8226 | |
| | | | |
| 4. Registered Agent Name and Address | | Desistand Agent | |
| Registered Agent | | Registered Agent Kyli A Kenda | |
| | | Physical Address: | |
| | | 4486 W FAIRWAY DR | |
| | | 228 | |
| | | COEUR D ALENE, ID 83815 | |
| | | Mailing Address: | |
| | | 4486 W FAIRWAY DR | |
| | | APT 228 | |
| | | COEUR D ALENE, ID 83815-8226 | |
| I affirm that the registered age | ent appointed has consented | d to serve as registered agent for this entity. | |
| 5. Governors | | | |
| Name | | Address | |
| Kyli A Kenda | 4486 W FAIRWAY DR 228 | } | |
| | COEUR D'ALENE, ID | 83815 | |
| Signature of Organizer: | | | |
| | | | |
| Kyli Kenda | | 12/30/2022 | |

Sign Here