



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

11 MAY -9 PM 12:42

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Top of Mind Concepts, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

3526 E. Handcart Ln. Boise, Id. 83716

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Matthew Burke Strohfus

(Name)

3526 E. Handcart Ln. Boise, Id. 83716

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Matthew Strohfus

3526 E. Handcart Ln. Boise, Id. 83716

5. Mailing address for future correspondence (annual report notices):

3526 E. Handcart Ln. Boise, Id. 83716

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: Matthew Strohfus

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
05/09/2011 05:00
CK: 673439 CT: 172099 DH: 1272045
1 @ 100.00 = 100.00 ORGAN LLC # 2

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