



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 JUN 10 PM 12:54

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Vannuzzi LLC

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

5058 N ICE SPRINGS WAY BOISE ID 83713

(Street Address)

(Mailing Address, if different than street address)

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

Jamie Vannuzzi  
(Name)5058 N ICE SPRINGS WAY  
(Street Address)  
BOISE ID 83713

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

Name	Address
<u>JAMIE VANNUZZI</u>	<u>5058 N ICE SPRINGS WAY BOISE</u> <u>83713</u>
_____	_____
_____	_____
_____	_____

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

5058 N ICE SPRINGS WAY BOISE ID 83713

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature [Signature]  
Typed Name: Jamie VannuzziSignature \_\_\_\_\_  
Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
06/10/2014 05:00  
CK:1038 CT:297818 BH:1428548  
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