251		CERTIFICATE O LIMITED LIABIL Title 30, Chapters 21 and 25 Filing fee: \$100 typed, \$120 Complete and submit the app	ITY COMPAI , Idaho Code not typed blication in <u>duplicate</u> .		
1.	Make Yo	e of the limited liability comp ur Mark LLC. Remember to include the words "Limi		mited Company," or the abbreviations L.L.C., LL.C. or LC)	
2.	The complete street and mailing addresses of the principal office is: 551 Michael Avenue, Pocatello, ID 33202 (Street Address)				
	551 Michael Avenue, Pocatello, ID g3262 (Mailing Address, if different)				
3.	The name of the registered agent an Nick Garcia		nd street address of the registered agent: 551 Michael Avenue, Pocatello, ID 83202 (Address cannot be a post office box or postal mail box)		
4.	The name Nick Gare (Name)	e and address of at least or cia	-	mited liability company: nue, Pocatello, ID 83 202	
	Rosie Garcia		551 Michael Avenue, Pocatello, ID 83202		
	(Name)		(Address)		
	(Name)		(Address)		
5.	Mailing address for future correspondence (annual report notices): 551 Michael Avenue, Pocatello, ID 83202 (Address)				
Sign	ature of or	ganizer(s)	י ר ו	Secretary of State use only	
Print	ature: ed Name: ature:	Nick Garcia		IDAHO SECRETARY OF STATE 05/06/2016 05:00 CK:1001 CT:324098 BH:1527260 1@ 100.00 = 100.00 ORGAN LLC #2	
Printed Name: Rosie Garcia W166335					