



# CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 JAN 15 PM 3:54

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Revive Cabinetry LLC

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

863 S Otter Ave  
(Street Address)

Meridian, ID 83642  
(Mailing Address, if different than street address)

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

W Daryl Spackman  
(Name)

863 Otter Ave, Meridian, ID  
(Street Address)

83642

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

W. Daryl Spackman  
Jacob Prince  
Name

863 Otter Ave, Meridian, ID 83642  
154 Lynwood Cir, Meridian, ID 83642  
Address

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

863 Otter Ave, Meridian, ID 83642

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: W Daryl Spackman

Signature

Typed Name: Jacob Prince

Secretary of State use only

W133218

IDAHO SECRETARY OF STATE  
01/15/2014 05:00  
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