251



## CERTIFICATE OF ORGANIZATION 2916 JUN 23 PM 4: 36 I IMITED LIABILITY COMPANY

t The	·	back of application)	STATE OF IDAHO
	name of the limited liability n's Shop, LLC	/ company is:	
609 (Stree P.O.	complete street and mailing 6th Ave., Deary, ID 83823 at Address) . Box 201, Deary, ID 83823 ng Address, if different than street addr		designated office:
3. The	name and complete street	address of the registere	d agent:
Thoi (Nam	mas Dean	609 6th Ave., Deary, (Street Address)	ID 83823
4. The r	name and address of at lea eany: Name	ast one member or mana	ager of the limited liability
Thor	nas Dean	609 6th Ave., Deary,	· <del></del>
	ng address for future corres Box 201, Deary, ID 83823	spondence (annual repo	rt notices):
6. Futur	e effective date of filing (op	otional):	
ngnatur erson,	୬ ପା ପ ନାପ୍ତାପଥିବା, ଜନ୍ମେନ୍ତ	i Vi autilVilZgu	
ignature	Susan R. Wilson Attorney	av at law	Secretary of State use only
yped Na	me: Susan R. Wilson, Attorne	y at Law	IDAHO SECRETARY OF STA

Signature\_\_\_\_\_ Typed Name:

06/24/2016 05:00

CK:3976160 CT:172099 BH:1534838 10 100.00 = 100.00 ORGAN LLC #2

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