

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

(Instructions on back of application)

11 AUG 19 AM 9: 15

1.	The name of the limited liability company is:		SECRETORY OF STATE
		cmj stuffers LLC	STATE OF IDAHO
2.	The complete street and mailing addresses of the initial designated/principal office: 396 S Malachite Ave Meridian ID 83642 (Street Address)		
	,		
^	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Christopher A Stobb	396 S Malachite Ave Meridian, ID 83642	
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>	Address	
	Christopher A Stobb	396 S Malachite Ave. Meridian, ID 83642	
5	Mailing address for fit is agreed		
J,	lailing address for future correspondence (annual report notices): 396 S Malachite Ave. Meridian, ID. 83642		
6. Future effective date of filing (optional):			
Sign	nature of a manager, member son.	or authorized	
0:	(to A)	AM I	Secretary of State use only
_	nature <u>(Mustaphs</u> Un Ale ed Name: <u>Christopher A. Stobb</u>		
ı ypı	ed Name.		
Sign	nature		
Typed Name: IDAHO SECRETARY OF STATE			08/19/2011 05:00 CK: 920 CT: 261694 BH: 1287167
			1 0 100.00 = 180.00 ORGAN LLC N 2

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