

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY 18 FEB. 16 THE 11

(Instructions on back of application)

CONTRACTOR OF AND

1. The name of the limited liab	ility company is:
i. The name of the limited has	Idaho Furniture Exchange LLC .
2. The complete street and ma 6892 Fairview Avenue, Boise Id	iling addresses of the initial designated/principal office:
(Street Address) 3011 N 35th Street Boise, ID 83	703
(Mailing Address, if different than street	
3. The name and complete str	eet address of the registered agent:
Julie Alexander	3011 N 35th Street Boise, ID 83703
(Name)	(Street Address)
company:	least one member or manager of the limited liability
<u>Name</u>	Address
Julie Alexander	3011 N 35th Street Boise, ID 83703
i. Mailing address for future co	prespondence (annual report notices):
3011 N 35th Street Boise, ID 83	. , , , , ,
6. Future effective date of filing	(optional):
ignature of a manager men	nber or authorized
erson	Secretary of State use only
ignature MMM	
yped Name: Julie Alexander	
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ignature	IDAHO SECRETARY OF STATE 02/16/2011 05:00
Aneq Name.	CK: 688443 CT: 172899 BH: 12683 1 8 189.80 = 189.80 ORGAN I C N

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