

Pey. 11/2015

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

**FILED EFFECTIVE** 

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

2017 JAN 13 PM 4: 42

Complete and submit the application in duplicate.

SECRETARY OF STATE STATE OF IDAHO

The man - 245 - 95 - 24 - 4 12	1. 1164	STATE OF IDAKO
The name of the limited li		
Lost Key escape rooms,		
(Remamber to Include t	ne words "Limited Liability Company,"	"Limited Company," or the abbreviations L.L.C., LLC, or LC)
The complete street and r	mailing addresses of the prir	ncipal office is:
846 Main Street, Lewiston		• • • • • • • • • • • • • • • • • • • •
(Street Address)	<del></del>	
(Mailing Address, if different)	<del></del>	
(whentig rodicess, it directory)		
The name of the registere	d agent and street address	of the registered agent:
Kelsy Gibbs	1114 12th St, Lewiston, ID 83501	
(Name)	(Address cannot be a post office box or postal mail box)	
	at least one governor of the	• • •
Kelsy Gibbs	1114 12th St, Lewiston, ID 83501	
(Name)	(Address)	
Kristin Legg	1114 12th St, Lewiston, ID 83501	
(Name)	(Address)	——————————————————————————————————————
(Name)	(Address)	
(Name)	(Address)	
	<b>V</b>	
Mailing address for future	correspondence (annual rep	port notices):
846 Main St., Lewiston, ID	•	•
(Address)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	<del></del>
ature of organizer(s).	Ø a	
ature: VISI ASi	lle	Secretary of State use only
1		TRANS GESTAMMAN OF GRAND
ed Name: Kelsy Gibbs		1DAHO SECRETARY OF STATE 01/17/2017 05:00
		CK:4495100 CT:172099 BH:156404
ature:		, 10 100.00 = 100.00 DEGAN LLC #
	<del></del>	11111 040
ed Name:		W176973