

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2014 AUG 11 AM 9: 47

(Instructions on back of application) 1. The name of the limited liability company is: Cindy Wageman L.L.C 2. The complete street and mailing addresses of the initial designated office: 17790 Friends Rd Caldwell, Id 83607 (Street Address) (Mailing Address, if different than street address) 3. The name and complete street address of the registered agent: 17790 Friends Rd Caldwell, Id 83607 Cindy Wageman (Name) (Street Address) 4. The name and address of at least one member or manager of the limited liability company: <u>Name</u> Address 17790 Friends Rd Caldwell, Id 83607 Cindy Wageman

Mailing address for future correspondence (annual report notices):

17790 Friends Rd Caldwell, ld 83607

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

dy Wagemen Signature Typed Name: Cindy Wageman

Signature _____

Typed Name: _____

Secretary of State use only

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08/11/2014 05:00

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