

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

10 MAY 25 PM 1: 24

(Instructions on back of application)

	STATE OF IDAHO
The name of the limited liability of	company is:
Diversified Franchise Concepts, LLC	
The complete street and mailing	addresses of the initial designated/principal office:
	colline Bello Way, Eagle, ID 83616
(Street Address)	
(Mailing Address, if different than street address	9)
The name and complete street ac	ddress of the registered agent:
Eric E. Mott	1493 N. Colline Bello Way, Eagle, ID 83616
(Name)	(Street Address)
The name and address of at leas company:	t one member or manager of the limited liability
Name	Address
Eric E. Mott	1493 N. Colline Bello Way, Eagle, ID 83616
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•	
Mailing address for future corresp	condence (annual report notices):
	colline Belto Way, Eagle, ID 83616
Future effective date of filing (opt	ional):
(-)	
gnature of organizer(s). (An organizer	is a mamber or is
ing in behalf of a member or members).	ाउ व सरकाराज्या, ए। १७
/ /11	Secretary of State use only
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ped Name: Erie E. Mott	[8]
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ped Name:	IDAHO SECRETARY OF STATE
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