



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 NOV -5 AM 9:02

1. The name of the limited liability company is:

Nomad Sewing LLC

SECRETARY OF STATE
STATE OF IDAHO

2. The complete street and mailing addresses of the initial designated office:

25 Mores creek cicle, boise Idaho 83716

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Patrick Gladics

(Name)

25 Mores creek cicle, boise Idaho 83716

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Patrick Gladics

25 Mores creek cicle, boise Idaho 83716

5. Mailing address for future correspondence (annual report notices):

25 Mores creek cicle, boise Idaho 83716

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: Patrick Gladics

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

11/05/2014 05:00

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