



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in **duplicate**.

FILED EFFECTIVE

2017 JAN 31 AM 9:16

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:
SCALP ILLUSIONS LLC.

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC.)

2. The complete street and mailing addresses of the principal office is:
17 TARA LANE HORSESHOE BEND ID 83629

(Street Address)

1409 BRANDI LANE EMMETT ID 83617

(Mailing Address, if different)

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

LISA V LINDSTROM

1409 BRANDI LANE EMMETT ID 83617

(Name)

(Address cannot be a post office box or postal mail box.)

4. The name and address of at least one governor of the limited liability company:

LISA V LINDSTROM

1409 BRANDI LANE EMMETT ID 83617

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

1409 BRANDI LANE EMMETT ID 83617

(Address)

Signature of organizer(s).

Signature: Lisa V. Lindstrom

Printed Name: LISA V LINDSTROM

Signature: _____

Printed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

01/31/2017 05:00

CK:1128 CT:334011 BH:1566525

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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