

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2014 NOV 28 AM 9: 28

The name of the limited liabil	ity company is:	SECRE HAY OF STATE STATE OF IDAHO
Innovative Safety & Design LLC		
The complete street and maili 3459 N Stagecoach Drive	ing addresses of the	initial designated office:
(Street Address) Post Falls, ID 83854		
(Mailing Address, if different than street ac	ddress)	
The name and complete stree	et address of the req	gistered agent:
Randy Oswalt		ecoach Dr. Post Falls ID 83854
(Name)	(Street Address)	
The name and address of at l company:	east one member o	r manager of the limited liability
<u>Name</u>		Address
Tammy Flodquist	3459 N Stage	ecoach Drive, Post Falls, ID 83854
. Mailing address for future cor	respondence (annu	al report notices):
3459 N Stagecoach Drive, Post F	alls, ID 83854	
. Future effective date of filing	(optional):	
ignature of a manager, memb	per or authorized	
erson.		Secretary of State use only
Dand C) }	IDAKO SECRETARY OF STATE
gnature Thandi Source	\t	11/28/2014 05:00
ped Name: Randy@swalt		CK:204888122428 CT:138710 BH:145 1@ 100.00 = 100.00 ORGAN LLC #
01	1	10 100.00 - 100.00 CAGAA LIL #
gnature Commy Lot	Sur	
/ped Name: Tammy Flodquist	ν	`N144777

W144777