







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

-FILED-

File #: 0004030478

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Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (see descriptions below)	Standard (filing fee \$100)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	Shorty's On Main, LLC
2. The complete street address of the principal office is:	
Principal Office Address	1225 NORTH MAIN POCATELLO, ID 83204
3. The mailing address of the principal office is:	
Mailing Address	1225 N MAIN ST POCATELLO, ID 83204-2611
4. Registered Agent Name and Address	
Registered Agent	Registered Agent
	Nikalaos Stanworth Physical Address:
	1225 NORTH MAIN
	POCATELLO, ID 83204
	Mailing Address:
	1225 N MAIN ST POCATELLO, ID 83204-2611
☐ I affirm that the registered agent appointed has consented ☐ ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented agent	to serve as registered agent for this entity.
Name	Address
	1225 NORTH MAIN POCATELLO, ID 83204
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