



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2015 MAR 11 PM 2:46

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

SHOESTRING, LLC

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

13788 MARAVILLA ST.

(Street Address)

CALDWELL, ID 83607

(Mailing Address, if different than street address)

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

TAX MANAGEMENT SERVICES, LLC

(Name)

1224 7TH ST. SO. NAMPA, ID 83651

(Street Address)

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

Name

Address

VERNON LAWSON

13788 MARAVILLA ST. CALDWELL, ID 83607

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

1224 7TH ST SOUTH NAMPA, IDAHO 83651

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

Signature of a manager, member or authorized person.

Signature

Typed Name: VERNON LAWSON

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

03/11/2015 05:00

CK: CASH CT: 307515 BH: 1465624

1@ 100.00 = 100.00 ORGAN LLC #2

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