



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

DEC 16 AM 8:22
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

T&T Pizza, LLC.

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

1795 W. Broadway, #312, Idaho Falls, ID 83402

(Street Address)

(Mailing Address, if different than street address)

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

Troy Richards

(Name)

1795 W. Broadway, #312, Idaho Falls, ID 83402

(Street Address)

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

Name

Address

Troy Richards

1795 W. Broadway, #312, Idaho Falls, ID 83402

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

Same as above

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name:

Troy Richards

Signature

Typed Name:

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
12/16/2010 05:00
CK: 4883 CT: 3142 BH: 1251148
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