

CERTIFICATE OF ORGANIZATION EFFECTIVE LIMITED LIABILITY COMPANY

09 NOV 24 AN 10:38

(Instructions on back of application)

SECRETARY OF STATE

		CTATEROF ID AMA
1. The name of the limited liability	company is:	STATE OF IDAHO
	SMARTYS LLC	
2. The complete street and mailing	addresses of the initial	designated/principal office:
•	5843 S. ACHERON AVE	
(Street Address)	POICE ID 92700	
(Mailing Address, if different than street address	BOISE, ID 83709	
3. The name and complete street a		agent:
MINI DUGGAL		ON AVE, BOISE, ID 83709
(Name)	(Street Address)	
The name and address of at least company:	st one member or mana	ger of the limited liability
Name	Address	
MINI DUGGAL	5843 S. ACHEF	RON AVE, BOISE, ID 83709
<u></u>		
5. Mailing address for future corres	pondence (annual repor	t notices):
MINI DUGGAL, 5	843 S. ACHERON AVE, BO	ISE, ID 83709
6. Future effective date of filing (opt	tional):	
Signature of organizer(s). (An organizer	r is a member, or is	
acting in behalf of a member or members).		O and the second of the second
and some some	O PAG	Secretary of State use only
Signature	femski, C femskert, org. lt.; PMD	
Typed Name:MINI DUGGA	<u>L</u>	TRAUD CEPOETABY BE CTATE
	forms' 72008	IDAHO SECRETARY OF STATE 11/24/2009 05:00
Signature	De ord 07	CK: 152 CT: 242540 BH: 1196711 1 0 100.00 = 180.00 ORGAN LLC #
Typed Name:	evie	1 0 20.00 = 20.00 EXPEDITE C #