

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 JUL -8 AH 10: 56

SECRETION OF A

The name of the Prince of the	~ UI (3.1A1)
. The name of the limited liabi	ility company is: SECHE MRY OF STATE STATE OF IDAHO
MA	ARIAS MEXICAN RESTERAUNT LLC
The complete street address, principal office:	, and mailing address if different, of the initial designated/
	PPY DAY BLVD 100 CALDWELL,ID83607
The name of the commercial address of the non-commercial	registered agent; or the name and complete street all registered agent:
GUADALUPE SALINAS	SANCHEZ 4900 LAKE AVE SP 11 CALDWELL, ID 83607
The name and address of at le	east one member or manager of the limited liability
<u>Name</u>	Address
GUADALUPE SALINAS SANCH	HEZ 4900 LAKE AVE SP 11 CALDWELL,ID 83607
MAUDIE LOU SANCHEZ	16628 N GRAND PINE WAY 21 NAMPA, ID 83651
Mailing address for future corre	espondence (annual report notices):
4900 LA	KE AVE SP 11 CALDWELL, ID 83607
4900 LA	KE AVE SP 11 CALDWELL, ID 83607
Future effective date of filing (on nature of an organizer(s). (An organizer) acting in behalf of a required, and exists the second sec	optional): ganizer is a member, isting, initial member Secretary of State use only
Future effective date of filing (contacture of an organizer(s). (An organizer in behalf of a required, and existences).	optional): ganizer is a member, isting, initial member Secretary of State use only
Future effective date of filing (or nature of an organizer(s). (An organizer) acting in behalf of a required, and exidembers). The state of the control of	pptional):ganizer is a member, isting, initial member