

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY LIMITED LIABILITY COMPANY

(Instructions on back of application)

2010 NOV 22 PM 4: 26

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1. The name of the limited lia	bility company is:	SEUNI TARY UF STATE STATE OF IDAHO	
	Norwood Aikman, LLC		
 The complete street and m 453 W. Quarter Drive, Eagle, In (Street Address) 		designated/principal office:	
(Mailing Address, if different then stree	k address)		
3. The name and complete st	reet address of the registered	i agent:	
Laura Bettis	453 W. Quarter Drive,	453 W. Quarter Drive, Eagle, ID 83616	
(Name)	(Street Address)		
company: <u>Name</u> Laura Bettis	453 W. Quarter Drive.	<u>Address</u> 453 W. Quarter Drive, Eagle, ID 83816	
		ı	
5. Mailing address for future c	orraenondanoa (annual rano)	t national:	
453 W. Quarter Drive, Eagle, Id	· · · · · · · · · · · · · · · · · · ·	t nouces).	
6. Future effective date of filing	g (optional):		
Signature of a manager, mer	nber or authorized		
erson.	-	Secretary of State use only	
Signature / CCC			
yped Name: Attorney			
Signature		IDAHO SECRETARY OF STATI	
Signature		11/22/2010 05: CK: NONE CT: 2105 BH: 124	
yped Name:		1 6 100 00 - 100 00 DOCALL I	