

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

LIMITED	LIABILITY COMP	2014 MAY 30 PM 1: 12	
(Instru	ctions on back of application)	Sald HAL 20	
. The name of the limi	ted liability company is:	SECRETARY OF STATE STATE OF IDAHO	
Cheekychive, LLC			
. The complete street a 13069 Town Ridge Roa (Street Address)	and mailing addresses of the d, Boise, Idaho 83714	initial designated office:	
(Mailing Address, if different the	nan street address)		
	ete street address of the regi	stered agent:	
Kara Dudley	13069 Town R	idge Road, Boise, ID 83714	
(Name)	(Street Address)		
The name and addrest company:	ss of at least one member or	manager of the limited liability	
<u>Name</u>		Address	
Kara Dudley	13069 Town R	13069 Town Ridge Road, Boise, ID 83714	
5. Mailing address for fu 13069 Town Ridge Roa	iture correspondence (annua d, Boise, ID 83714	report notices):	
6. Future effective date	of filing (optional):		
Signature of a manage person.	r, member or authorized		
W 1	10	Secretary of State use only	
Signature	lee_		
Typed Name: Kara Dudley		IDAHO SECRETARY OF STATE	
Signature		05/30/2014 05:00 CK:1933642 CT:172099 BH:14	
Signature Fyped Name:		16 100.00 = 100.00 ORGAN	
Jeanie.			

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