



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

**FILED EFFECTIVE**

11 MAY 20 PM 1:29

SECRETARY OF STATE  
STATE OF IDAHO

(Instructions on back of application)

1. The name of the limited liability company is:

Design with Style LLC

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

985 W Newport Street, Meridian, ID 83646

(Street Address)

(Mailing Address, if different than street address)

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

Sheri Finco

(Name)

985 W Newport Street, Meridian, ID 83646

(Street Address)

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

**Name**

**Address**

Sheri Finco

985 W Newport Street, Meridian, ID 83646

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

985 W Newport Street, Meridian, ID 83646

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

*Sheri Finco*

Typed Name: Sheri Finco

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE  
05/20/2011 05:00  
CK: 683289 CT: 172899 BH: 1274630  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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