Denney



Reset Form



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

For Office Use Only

-FILED-

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	Base Filing ree: \$100.0	JU + \$20.00 for manual	processing (<u>rorm mu</u>	st be typed).	
1.	The name of the limited liability 닉 니		NAILS	LLC	
	(Remember to include the wo	ords "Limited Liability Compar	y," "Limited Company, "o	r the abbreviations L.L.	C., LLC, or LC)
2.	The complete street and mailing addresses of the principal office is.				
	1412 E	STRAUS	S DR	MERID	IAN ID
	(Street Address)				83646
	(Mailing Address, if different)				
3.	The name and complete street a	address of the registe	red agent.		
(CHAU MILLER	/412 E S	TRAUSS DR	MERIDIAL	1 IP 8362
	(Name)	(Address)			
4.	The name and address of at least one governor of the limited liability company. CHAU MILLE 1412 E STRAUSS DR MERIDIAN 1P (Name) (Address) 83 646				
	CHAU MILLLE	1412 E	STRAUSS D	2 MERII	DAN IP
	(Name)	(Address)			83 646
					67010
	(Name)	(Address)		 	
	(Name)	(Address)		·	
	(Name)	(Address)	, , , , , , , , , , , , , , , , , , , 		
5.	Mailing address for future correspondence (annual report notices):				
	1412 E STRA	USS DR	•	2 10	83646
	(Mailing Address)				
Sign	nature of organizer(s).				
Print	ted Name: <u>CHAU M</u>)	LLRE		Secretary of State us	e only
Sign	nature:				

Signature:

Printed Name: