



# CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application) 2013 MAR -4 AM 9:30

1. The name of the limited liability company is:

WISH 2 wed LLC

SECRETARY OF STATE  
STATE OF IDAHO

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

1203 S. RIVERSIDE HARBOUR DRIVE

(Street Address)

POST FALLS, ID 83854

(Mailing Address, if different than street address)

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

Misty Ceriello

(Name)

same as #2

(Street Address)

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

Name

JANET CARPENTER

Address

1217 N. CATHERINE ST. POST FALLS  
ID 83854

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

1203 Southriverside Harbor Drive. Post Falls Id  
83854

6. Future effective date of filing (optional): ASAP

Signature of a manager, member or authorized person.

Signature

Misty L. Ceriello

Typed Name:

Signature

Janet Carpenter

Typed Name:

Secretary of State use only

103/04/2013 05:00  
CK: 130 CT: 200115 BH: 1362746  
1 E 100.00 = 100.00 ORGAN LLC # 2

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