



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2017 SEP -5 AM 10:44

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:
Skull Tonic LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:
3030 Chisholm Drive, Hagerman, ID 83332

(Street Address)

(Mailing Address - if different)

3. The name of the registered agent and the street address of the registered agent:
Lisa Silonis **3030 Chisholm Drive, Hagerman, ID 83332**

(Name)

(Address cannot be a post office box or postal mail box.)

4. The name and address of at least one governor of the limited liability company:
Shane Silonis **3030 Chisholm Drive, Hagerman, ID 83332**

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):
3030 Chisholm Drive, Hagerman, ID 83332

(Address)

Signature of organizer(s).

Signature: *Lisa Silonis*

Printed Name: Lisa Silonis

Signature: *Shane Silonis*

Printed Name: Shane Silonis

Secretary of State use only

IDAHO SECRETARY OF STATE

09/05/2017 05:00

CK:2018 CT:345125 BH:1601331

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