

## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

07 JUN 25 AM 11: 27

| <b>—</b>  |   | SECONTARY OF ATTA   |
|---|---|---|
| The name of the limited liability   | company is:   | SECRETARY OF STATE STATE OF IDAHO   |
| Shoe Goddess, LLC   |   |   |
| The street address of the initial r   | registered office is:                                 |   |
| 903 Caldwell #127 Nampa, ID   | 83651   |   |
| and the name of the initial registe   | ered agent at the above a                             | address is:   |
| Julie Upton   |   |   |
| The mailing address for future co   | orrespondence is:                                     |   |
| 903 Caldwell #127 Nampa, ID   |   |   |
| Management of the limited liabilit  | ty company will be vested                             | d in:   |
| Manager(s)  or Member(s)  |   |   |
|   | FII (bicase crieck life appli                         | Aniara 104)   |
| If management is to be vested in  | one or more manager(s)                                | , list the name(s) and  |
| addraga(aa) of at lacatana !=!!!=!  |   | it is to he vested in the   |
| address(es) of at least one initial member(s), list the name(s) and   | i manager. If managemer<br>address(es) of at least or | ne initial member.  |
| address(es) of at least one initial   | address(es) of at least or                            | ne initial member.  |
| address(es) of at least one initial member(s), list the name(s) and Name  | address(es) of at least or                            | ne initial member.  |
| address(es) of at least one initial member(s), list the name(s) and   | address(es) of at least or                            | ne initial member.  |
| address(es) of at least one initial member(s), list the name(s) and Name  | address(es) of at least or                            | ne initial member.  |
| address(es) of at least one initial member(s), list the name(s) and Name  | address(es) of at least or                            | ne initial member.  |
| address(es) of at least one initial member(s), list the name(s) and Name  | address(es) of at least or                            | ne initial member.  |
| address(es) of at least one initial member(s), list the name(s) and Name  | address(es) of at least or                            | ne initial member.  |
| address(es) of at least one initial member(s), list the name(s) and Name  | address(es) of at least or                            | ne initial member.  |
| address(es) of at least one initial member(s), list the name(s) and Name  Julie Upton   | 903 Caldwell #127                                     | Address Nampa, ID 83651   |
| Address(es) of at least one initial member(s), list the name(s) and some  Name  Julie Upton  Signature of at least one person recognitions.                                     | 903 Caldwell #127                                     | Address Nampa, ID 83651  The limited liability company:                             |
| Address(es) of at least one initial member(s), list the name(s) and some  Name  Julie Upton  Signature of at least one person resignature:                                      | 903 Caldwell #127                                     | Address Nampa, ID 83651   |
| Address(es) of at least one initial member(s), list the name(s) and some  Name  Julie Upton  Signature of at least one person recognitions.                                     | 903 Caldwell #127                                     | Address Nampa, ID 83651  The limited liability company:                             |
| Address(es) of at least one initial member(s), list the name(s) and some some signature of at least one person resignature:  Typed Name: Julie Upton  Capacity: Manager         | 903 Caldwell #127                                     | Address Nampa, ID 83651  The limited liability company:                             |
| Signature of at least one person recipied Name  Signature: Multiplication  Signature: Multiplication  Signature: Manager  Signature: Manager                                    | 903 Caldwell #127                                     | Address Nampa, ID 83651  The limited liability company:                             |
| Address(es) of at least one initial member(s), list the name(s) and Name  Julie Upton  Signature of at least one person resignature:  Typed Name Julie Upton  Capacity: Manager | 903 Caldwell #127                                     | Address Nampa, ID 83651  The limited liability company: Secretary of State use only |