

Rev. 11/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

WILLESLET

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

2016 MAY 19 AM 9: 13

Complete and submit the application in duplicate.

SECRETARY OF STATE STATE OF IDAHO

	Complete and sub	mit the application in <u>duplicat</u>	STATE OF IDAHO	
1.	The name of the limited liability company is: Cuppa MoJoe, LLC			
	April 1984 - North Charles			
2.	The complete street and mailing addresses of the principal office is: 5782 E. Roger Dr, Post Falls, ID 83854			
	Stove scaress			
	Mading Andrews Tomas and			
3.	The name of the registered agent and street address of the registered agent:			
	Matthew Rhew	5782 E. Roger Dr, Post Falls, ID 83854		
	(Matrie)	(Audress cannot be a post nifice box o.) ustal mail box)		
4.	The name and address of at least one governor of the limited liability company: Matthew Rhew 5782 E. Roger Dr, Post Falls, ID 83854			
	(M: 16)	Welcaese)		
	Ashley Rhew	5782 E. Roger Dr, Post Falls, ID 83854		
	(Name)	(Andress)		
		9.500.00		
5.	Mailing address for future correspondence (annual report notices): c/o Cuppa MoJoe, LLC, 5782 E. Roger Dr, Post Falls, ID 83854			
	ten kirology			
Sig	nature of organizer(s).			
Sig	nature:	100	Secretary of State use only	
_	nted Name: Matthew Rhew		1DAHO SECRETARY OF STATE 05/19/2016 05:00	
Sig	nature: Nolly R	hw	CK:1435 CT:324576 BH:1529235 10 100.00 = 100.00 ORGAN LLC #2 10 20.00 = 20.00 EXPEDITE C #3	
Prir	nted Name: Ashley Rhew			