



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

11 MAR 10 PM 12:31

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Gma Honeys Healing Salve LLC

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

502 4th Ave South Hailey, Id 83333  
(Street Address)

po box 2933 Hailey, ID 83333  
(Mailing Address, if different than street address)

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

Lacey Hillman  
(Name)

502 4th Ave South  
(Street Address)

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

Name

Address

Allie Hillman

502 4th Ave South

Lacey Hillman

Hailey, Id 83333

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

po box 2933 Hailey, Id 83333

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Lacey Hillman

Typed Name: Lacey Hillman

Signature Allie Hillman

Typed Name: Allie Mae Hillman

Secretary of State use only

IDAHO SECRETARY OF STATE  
03/10/2011 05:00  
CK: 625815 CT: 172099 BH: 1263702  
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