

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

SECRETARY OF CO.

(Instructions on back of application)

The name of the limited liabil	ity company is:	STATE OF IDAHO	
Little Blessings, LLC			
The complete street and maili	•	e initial designated office:	
(Street Address) PO Box 8442 Boise, Idaho, 83707			
(Mailing Address, if different than street ad	ddress)		
The name and complete stree	et address of the re	gistered agent:	
Heather Weavers	11546 West Granger Street, Boise, Idaho, 83713		
(Name)	(Street Address)		
company:	east one member o	r manager of the limited liability	
Name Heather Weavers	11646 West I	<u>Address</u> 11546 West Granger Street, Boise, Idaho, 83713	
Mailing address for future core PO Box 8442 Boise, Idaho, 83707	•	al report notices):	
Future effective date of filing ((optional):		
nature of a manager, memb	per or authorized		
1) -		Secretary of State use only IDAHO SECRETARY OF STATE	
gnature + Cu .		06/05/2015 05:00	
ed Name: Heather Weavers		CK:236 CT:311012 BH:14785	
nature		1112h C C A	

WI52556

Typed Name: _____