



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 MAY -4 AM 9:43

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Myofly C.C.C

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

406 E Jefferson, Boise ID 83712

(Street Address)

(Mailing Address, if different than street address)

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

Amber Frisch

(Name)

406 E Jefferson, Boise ID 83712

(Street Address)

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

Name

Address

Chris Frisch

406 E Jefferson Boise ID 83712

Amber Frisch

406 E Jefferson Boise ID 83712

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

406 E Jefferson, Boise ID 83712

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Amber Frisch

Typed Name: AMBER FRISCH

Signature

Chris Frisch

Typed Name: CHRIS FRISCH

Secretary of State use only

IDAHO SECRETARY OF STATE
05/04/2011 05:00
CK: 134 CT: 250442 BH: 1272162
1 @ 100.00 = 100.00 ORGAN LLC # 2

W103042