



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 DEC -2 AM 8:39

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Twisted LLC

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

250 N 5th St Suite L Pocatello, Idaho 83201

(Street Address)

(Mailing Address, if different than street address)

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

Melissa Frasure

(Name)

250 N 5th St Suite L Pocatello, Idaho 83201

(Street Address)

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

Name

Address

Melissa Frasure

250 N 5th St Suite L Pocatello, Idaho 83201

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

250 N 5th St Suite L Pocatello Idaho 83201

6. Future effective date of filing (optional): n/a

Signature of a manager, member or authorized person.

Signature

Typed Name: Melissa Frasure

Signature

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
12/02/2011 05:00  
CK: 2225 CT: 264578 SH: 1300028  
1 @ 100.00 = 100.00 ORGAN LLC # 2  
1 @ 20.00 = 20.00 EXPEDITE C # 3

W/108701