



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

11 JAN 25 AM 8:15

1. The name of the limited liability company is:

CUSTOM BATH CREATIONS, LLC

SECRETARY OF STATE
STATE OF IDAHO

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

2234 W RIDGE PT AVE, NAMPA, ID 83651

(Street Address)

(Mailing Address, if different than street address)

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

GERALD D VAN BUREN

(Name)

2119 W ROBERTS AVE, NAMPA, ID 83651

(Street Address)

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

Name

Address

DAVID J HICKMAN

2234 W RIDGE PT AVE, NAMPA, ID 83651

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

2234 W RIDGE PT AVE, NAMPA, ID 83651

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: DAVID J HICKMAN

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
01/25/2011 05:00
CK: 598916 CT: 172899 BH: 1256816
1 @ 100.00 = 100.00 ORGAN LLC # 2

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