

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 JUL -2 AM 8: 42

`	,,	SECRETARY OF STATE STATE OF IDAHO
The name of the limited liability compa	any is:	STATE OF IDAHO"
Tacos El Mescalito LLC		
The complete street and mailing addre	sses of the init	al designated office:
(Street Address) PO Box 733 Kamiah, ID 83536 (Mailing Address, if different than street address)		
The name and complete street addres	s of the registe	red agent:
Tomas Gonzalez	107 First Street	Kamiah, ID 83536
(Name)	(Street Address)	
Name Tomas Gonzalez	107 First Street	Address Kamiah, ID 83536
101111111111111111111111111111111111111		
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Mailing address for future corresponde	ence (annual re	port notices):
PO Box 733 Kamiah, ID 83536		
Future effective date of filing (optional):	
nature of a manager, member or a	uthorized	
son.		Secretary of State use only
nature TOmas 50N2al	ez	IDAHO SECRETARY OF STATE
ped Name: Tomas Gonzalez		07/02/2015 05:00 CK:13538 CT:189256 BH:1482
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nature		

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Typed Name: _____