

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 OCT - 1 PM 3: 11

	(it of application,	
1. The name of the limited liability company is:		mpany is:	SECRETARY OF STATE STATE OF IDAHO
Top Of The	Morning LLC		SIMIE OF IUANO
9474 W. Fa (Street Addres P.O. Box 44	ete street and mailing ac irview Ave. Boise, ID 83704 s) 1403 Boise, ID 83711 ss, if different than street address)	ddresses of the ir	nitial designated office:
_	and complete street add	dress of the regist	ered agent:
Ryan Major	S	1300 S. Atlantic St. Boise, ID 83705	
(Name)		(Street Address)	
4. The name company:	and address of at least	one member or n	nanager of the limited liability
	<u>Name</u>	Address	
Ryan Majors		1300 S. Atlantic St. Boise, ID 83705	
	Iress for future correspo 1403 Boise, ID 83711	ondence (annual i	report notices):
6. Future effe	ctive date of filing (optio	onal):	
Signature of a person.	n manager, member o	r authorized	
Signature	My		Secretary of State use only 10AHO SECRETARY OF STATE 10/01/2014 05:00
Typed Name	Ryan Majors		CK:1560 CT:298616 BH:14435 16 100.00 = 100.00 ORGAN LL
Signature			11864IW
Typed Name:	,		,

cert_org_flc Rev. 07/2010