



CERTIFICATE OF ORGANIZATION **FILED EFFECTIVE** LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 JAN 22 AM 11:50

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

THE FLOWER POT PILLOW L.L.C.

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

1947 W. DIVIDE CK. ST. - MERIDIAN, ID 83646

(Street Address)

P.O. Box 2684 Eagle, IDAHO 83616

(Mailing Address, if different than street address)

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

LORRAINE LORENZO 1947 W. DIVIDE CK ST.
(Name) (Street Address) MERIDIAN, ID. 83646

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

Name

Address

LORRAINE LORENZO 1947 W. DIVIDE CK ST.
MERIDIAN, ID. 83646

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

P.O. Box 2684, Eagle, ID. 83616

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature Lorraine Lorenzo
Typed Name: LORRAINE LORENZO

Signature _____
Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
01/22/2010 05:00
CK: 1646 CT: 286489 DN: 1284630
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