



**CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

FILED EFFECTIVE
08 SEP 17 AM 8:43
SECRETARY OF STATE
STATE OF IDAHO

- 1. The name of the limited liability company is:**

Black Sheep Boutique, llc

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

629 N. 3510 E. Menan, ID 83434

(Street Address)

P.O. Box 142 Menan, ID 83434

(Mailing Address, if different than street address)

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

Becky Nelson

(Name)

629 N. 3510 E. Menan, ID 83434

(Street Address)

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

Name _____

Address

Becky Nelson

629 N. 3510 E. Menan, ID 83434

Trisha Pinter

2481 E. 129 North Idaho Falls, ID 83401

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

P.O. Box 142 Menan, ID 83434

- 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

Typed Name:

Becky Nelson

Signature

Typed Name:

Trisha Pintar

Secretary of State use only

http://comptonsallc.com/secretory_bill_pamd
 Revised: 07/2008

IDAHO SECRETARY OF STATE
09/17/2008 05:00
CK: 2866 CT: 174222 BH: 1136256
1 @ 100.00 = 100.00 ORGAN LLC # 2

W 77739