



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 JUL 18 AM 9:13

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Smashcraft, LLC.

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

9155 S. Perfect Ln. Kuna ID 83634  
(Street Address)

(Mailing Address, if different than street address)

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

Jacob Ashcraft  
(Name)

9155 S. Perfect Ln. Kuna ID 83634  
(Street Address)

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

Name	Address
<u>Jacob Ashcraft</u>	<u>9155 S. Perfect Ln. Kuna ID 83634</u>
<u>John Nichols</u>	<u>2854 South Appia Pl. Meridian ID 83642</u>

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

9155 S. Perfect Ln. Kuna ID 83634

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature [Signature]  
Typed Name: Jacob Ashcraft

Signature [Signature]  
Typed Name: John Nichols

Secretary of State use only

IDAHO SECRETARY OF STATE  
07/18/2013 05:00  
CK: 1030 CT: 205437 BH: 1382588  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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