

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

1110725 AN 8:45

1.	The name of the limited liability company is: SECHE BY CLASTATE STATE OF IDAHO			
2.	The complete street and mailing addresses of the initial designated office:			
	1407 Melody Dr. Idaho (Street Address)	Falls, I	COPES 10:	
	(Mailing Address, if different than street address)			
3.	The name and complete street address of the registered agent:			
	David Titland (Name)	1407 Mel (Street Address)	CT, 21167 odeby 21 ybo	
4.	The name and address of at least one member or manager of the limited liability company:			
	<u>Name</u>		Address:	
	Misty Titland	1407 Mel	ody Dr. IF, ID. 83402	
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5. Mailing address for future correspondence (annual report notices):			al report notices):	
	1407 Melody Dr. Idaho F	alis , ID.	8340ጋ	
6.	. Future effective date of filing (optional):			
_	nature of a manager, member or son.	authorized		
			Secretary of State use only	
_	nature What y			
Тур	ed Name: Misty Titland (D	esigner)	IDAHO SECRETARY OF STATE	
Sig	nature ##		CK: 2288 CT: 263733 BH: 1299337	
Tve	ed Name: David Titland (c	v.merl	4 h cannan annun	

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