

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

10 JAN -7 AM 8: 28

(Ilistructions on t	back of application)	SEUNE PARY OF STATE
1. The name of the limited liability	company is:	STATE OF IDAHO
The Hallie of the minimum habiting	, ,	
	Wrap-It of Idaho, LLC	
. The complete street and mailing		<del>-</del>
1895 N woodruff	Idahotals I	<u> </u>
(Street Address)		
(Mailing Address, if different than street address	ess)	
. The name and complete street	address of the registered	d agent:
· · · · · · · · · · · · · · · · · · ·		
J.R. Henderson	1895 Al uscoda	uff Idahofallo ID 83401
(Name)	(Street Address)	V LAME UNITED TO SERVICE OF THE PARTY OF THE
. The name and address of at lea	ast one member or mana	ger of the limited liability
company:		
<u>Name</u>		Address
J.R.Henderson	1895 N woodre	FF Idahofalls In 83401
		,
	4	
	<u> </u>	
		•
. Mailing address for future corre	anandansa (annual rana	rt notices):
1895 N Wooden	A Idahotalls	[D 8340]
Francisco official data of fillings (	-4:IV.	
Future effective date of filing (o	ptional):	
ignature of organizer(s). (An organiz		
cting in behalf of a member or members)		Secretary of State use only
A/20	QW-	
ignature NO	Solution of the PMD Servised Officers of the	
yped Name: J.R.Henders	SON 21	
	forms	IDANO SECRETARY OF STATE 01/07/2010 0538
ignature	28	CK: 19467 CT: 2293 BH: 1282
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