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# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

## FILED EFFECTIVE

2013 FEB 11 AM 9:29

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

A Tryst of Fate, LLC

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

5926 N. Collister Dr., Boise, Idaho 83703

(Street Address)

(Mailing Address, if different than street address)

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

Liane Eastman

(Name)

5926 N. Collister Dr., Boise, Idaho 83703 (County of Ada)

(Street Address)

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

Name

Address

Liane Eastman

5926 N. Collister Dr., Boise, Idaho 83703

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

5926 N. Collister Dr., Boise, Idaho 83703

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Karla Figueroa, Assistant Secretary,  
LegalZoom.com, Inc.

Signature

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

02/11/2013 05:00

CK: 1281845 CT: 172899 BH: 1359614

1 @ 100.00 = 100.00 ORGAN LLC # 2

1 @ 20.00 = 20.00 EXPEDITE C # 3

cert.org file Rev. 07/2010

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