



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 NOV 25 AM 8:32

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Twisted Tooling, LLC

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

16917 N Kettering Ct, Nampa, ID 83687

(Street Address)

(Mailing Address, if different than street address)

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

John Wells

(Name)

16917 N Kettering Ct, Nampa, ID 83687

(Street Address)

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

Name

John Wells

Address

16917 N Kettering Ct, Nampa, ID 83687

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

16917 N Kettering Ct, Nampa, ID 83687

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

Signature of a manager, member or authorized person.

Signature \_\_\_\_\_

Typed Name: John Wells

Signature \_\_\_\_\_

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

Secretary of State use only

IDaho SECRETARY OF STATE

11/25/2014 05:00

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