FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Click here to clear form.

2014 MAY 19 AM 9:37

	(Instructions on bac	k of application)	ATADE TO THE AMERICA
1. The name	of the limited liability co	mpany is:	SECHE AND STATE
Sa	ne Minds LL	<u>C</u>	
2. The comple	ete street and mailing a	ddresses of the initial desig	nated office:
1887	~	, Twin Falls, Il	
(Street Addres	ss)		
(Mailing Addre	ess, if different than street address)		
3. The name	and complete street add	Iress of the registered ager	nt:
Kirk (Name)	Hazen	(Street Address)	d, Twin Falls, ID83301
The name company:	and address of at least	one member or manager o	f the limited liability
. 1	<u>Name</u>		ress
			Rd, Twin Fulls, 20 83301
Marjea	n Flowers-Hazen	11	
7	-		
			
			
			·
5. Mailing add	dress for future correspo	endence (annual report noti	ces):
_		Twin Falls, ID	· ·
Future effe	ctive date of filing (option	nal):	
	a manager, member o	r authorized	
person.	11.1	S	Secretary of State use only
Signature &	Il Har		
Typed Name:	Kirk Hazen		IDAHO SECRETARY OF STATE
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		——————————————————————————————————————	05/19/2014 05:00
Signature			447 CT:200640 BH:14253
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