

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

09 AUG 14 AM 8: 23

SECRETARY OF STATE STATE OF IDAHO

(Instructions on back of application)

•	STATE OF W SI	ATE
I. The name of the limited liability cor	mpany is:	)
GARY G	RIFFITHS ENGRAVING, LLC	
2. The complete street and mailing ad	dresses of the initial designated/principal office	:
96	6 WEST 8TH SOUTH	
(Street Address)	ESTON, IDAHO 83263	<u></u>
(Mailing Address, if different than street address)		
. The name and complete street add	ress of the registered agent:	
GARETH J. GRIFFITHS	96 WEST 8TH SOUTH, PRESTON, ID 83263	** # · ·
(Name)	(Street Address)	<del></del>
company: <u>Name</u> GARETH J. GRIFFITHS	Address 96 WEST 8TH SOUTH, PRESTON, ID 83263	· .
GARETH J. GRIFFITHS	96 WEST 8TH SOUTH, PRESTON, ID 83263	<del></del> .
JOANNE L. GRIFFITHS	96 WEST 8TH SOUTH, PRESTON, ID 83263	
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	i.	, - · ·
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		<del></del>
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. Mailing address for future correspo	ndence (annual report notices):	
96 WEST 8TH	H SOUTH, PRESTON, ID 83263	<del></del>
Francis of street and a section of and	N.	
. Future effective date of filing (option	nai):	<del></del>
anoturo of organizor(a) (As associated	a member aria	
gnature of organizer(s). (An organizer is a ting in behalf of a member or members).	a member, or is	· .
1. (0)0, -1.	Secretary of State use only	
gnature Landh Treffille	- I I I	; ·
ped Name: GARETH J. GRIFFIT	HS Jag	1
ignature <u>Joanne</u> L Druffi	CK: 1993 CT: 297867 F	STATE <b>05:0</b> H: 11829
rped Name <sup>r</sup> JOANNE L. GRIFFIT	. HS   <u>§</u>	irgan LLC

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