

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

## FILE D EFFECTIVE

10 DEI 20 AM 9: 25

1	The name of	the limited	liability company	ie.

SECRE PRY OF STATE

1. The name of the inflict hability o	STA	E OF IDAHO
A CO	FFEE & WINE AFFAIR, LLC	
<ol> <li>The complete street and mailing a 2221 Addison Avenue East, Twin Falls</li> </ol>	ncipal office:	
(Street Address) 2221 Addison Avenue East, Twin Falls		
(Mailing Address, If different than street address		
. The name and complete street ad		
Tonja Valdez	2221 Addison Avenue East, Twin Falls	, ID 83301
(Name)	(Street Address)	
<ul> <li>The name and address of at least company: Name</li> </ul>	one member or manager of the limi	t ∌d liability
Tonja Valdez	2221 Addison Avenue East, Twin Falls	EID 83301
. Mailing address for future corresp 2221 Addison Avenue East, Twin Falls,	` '	
. Future effective date of filing (option	onal):	
ignature of a manager, member of	or authorized	
ignature	Secretary of 5	ate use only
yped Name: Tokia Valdez		
ignature	12/20	CRETARY OF STATE
vped Name:	CK: 1518 C	7:241262 BH:125163 : 188.88 ORGAN LLC #

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