

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2015 JUL -6 AM 10: 43 SECRETARY

## (Instructions on back of application)

The name of the limited liability company is:		STATE OF BAHATE	
	BSN Creative Conce	4 (1 )	
2. The complete street and mail 1414 Park Ave. #68 Burley Idaho (Street Address)	<del>-</del>	e initial designated/principal office:	
(Mailing Address, if different than street a		ristarad agant:	
3. The name and complete stre	et address of the re	gistered agent.	
Barbara S Nyblad	1414 Park Av	1414 Park Ave. #68 Burley Idaho 83318	
(Name)	(Street Address	(Street Address)	
The name and address of at company:	least one member o	r manager of the limited liability	
<u>Name</u>		<u>Address</u>	
Barbara S Nyblad	1414 Park A	1414 Park Ave. #68 Burley Idaho 83318	
5. Mailing address for future cor	respondence (annu	al report notices):	
1414 Park Ave. #68 Burley Idaho	•	,	
6. Future effective date of filing	(optional):		
Signature of a manager, memi person.	ber or authorized		
	-1 //	Secretary of State use only IDAHO SECRETARY OF STATE	
Signature Barbara S. Mybland		07/06/2015 05:00	
Typed Name: Barbara S Nyblad		CK:2331 CT:282328 BH:1482511 10 100.00 = 100.00 ORGAN LLC # 10 20.00 = 20.00 EXPEDITE C #3	
Signature		ac all action markers by the first	
Typed Name:		401551105	

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