



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 AUG 12 AM 8:11

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

patmelehesdesigns LLC

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

228 Sorensen Creek, Victor, Idaho 83455

(Street Address)

(Mailing Address, if different than street address)

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

Patricia A Melehes

(Name)

228 Sorensen Creek, Victor, Idaho 83455

(Street Address)

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

Name

Address

Patricia A Melehes

228 Sorensen Creek, Victor, Idaho 83455

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

patmelehesdesigns, 228 Sorensen Creek, Victor, Idaho 83455

6. Future effective date of filing (optional): _____

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Patricia A Melehes

Typed Name:

Patricia A Melehes

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
08/12/2009 05:00
CK: 3779 CT: 239590 BH: 1182545
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Revised 07/2008

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