

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

## FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code

TO TO	Base Filing fee: \$100.00.		901F 60 Am		
	Complete and submit the app	olication in <u>duplicate</u> .	2015 JUL 17 AM 1	8: 46	
The nan	ne of the limited liability comp	pany is:	SECREYARY OF S STATE OF IDAI-	TATE IO	
	The Works	s Salon, LLC			
	(Remember to include the words "Limited	Liability Company," "Limited Co	ompanyj. "or the abbreviations L	L.C., LLC, or LC)	
The con	nplete street and mailing add	resses of the princip	al office is:		
233	a W theen h	1 - 000	Samoa	20 8	3686
(Street Addr			(City)		ipcode)
<u> </u>	a W Haroon W iress, if different)	900	Nampa (City)		<mark>වේගේ</mark> ර ipcode)
The nan	ne and complete street addre	ess of the registered	agent:		
Meli	son Uhle é	B332 W H	read hoos	Samoa I	<u>n 83686</u>
(Name)		(Address)	(City)	(State)	(Zipcode)
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(Name)	I'SSA WALE	<u> </u>	Jegon hoo	Contract Con	(Zipcode)
		for small the many	(\$ ,	(	<b>(- (</b>
(Name)		(Address)	(City)	(State)	(Zipcode)
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(Name)	·	( Pr. 3) (	(4)4.3	(Caman)	(Timenda)
i. actions		(Address)	(City)	(State)	(Zipcode)
(Name)		(Address)	(City)	(State)	(Zipcode)
		(1 seems on my	(40);	(a.v.,u.)	, , , , , , , , , , , , , , , , , , ,
Mailing	address for future correspon	dence (annual repor	t notices):		
2222	11 Hopen 1	p 000	None or	T	83686
(Addres	s)		(City)	(State)	(Zipcode)
gnature of	organizer(s).	Γ-	Secretary of State	e use only	<u> </u>
inted Name	:MElissa Hale		IDAHO SEC	RETARY OF STATE	
1			•	'2015 05:00 12478 BH:148	
gnature:	the said Y	2	16 100.00 = 1	00.00 ORGAN	LLC #2
			16 20.00 = 20	J.UU EXPEDIT	E U #3

Printed Name:

Signature:

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Rev. 07/2015