

## CERTIFICATE OF ORGANIZATION

	LIMITED LIABILITY COM	PANY
	(Instructions on back of application	on) OF STATE
1. The	name of the limited liability company is:	SECRICIARY OF STATE STATE OF IDAHO
	Botanica Tannine LL	
2. The complete street and mailing addresses of the initial designated/principal office:		
<del></del>	1005 Hickoryst	
	et Address) Service Doint, ID 8386 U ng Address, if different than street address)	· 
3. The name and complete street address of the registered agent:		
(Nam	chelle OSTROW 1006HtCl (Street Address	conject, sundpoint, 1083864
4. The name and address of at least one member or manager of the limited liability company:		
	Name	Address
M	chelle Ostrom 100stric	Konyst, sandpoint 1083864
	A-14	
E. Mailing addraga for future correspondence (appual report nations):		
5. Mailing address for future correspondence (annual report notices):  1005 Hickory St Sandpoint, 1083864		
TO STICKING ST STREET, ID 858000		
6. Futui	re effective date of filing (optional):	
Signatur person.	e of a manager, member or authorized	
•	Chairles ( OG - 11. )	Secretary of State use only
Signature		
Typed Na	ame: Michelle 6 strow	
Signature	)	IDAHO SECRETARY OF STATE 01/07/2011 05:00
	ame:	CK: 1296 CT: 254123 BH: 1254311 1 9 100.00 = 100.00 ORGAN LLC # 2
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