



Revised 12/2018

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

-FILED-

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B0506-1707 05

File #: 0003872108

| <b>'</b> |  | Base Filing fee: \$100.00 +                         | 150            | cessing (form must be | Date Filed: 5/7/2020 9:44:00 AM typed). |             |
|----------|--|---|----------------|-----------------------|---|-------------|
| 1.       | . The name of the limited liability company is: PEG OF MY HEART DESIGNS, LLC   |   |                |                       |   | /2020       |
|          | (Remember to include the words "Limited Liability Company," "Limited Company, "or the abbreviations L.L.C., LLC, or LC)    |   |                |                       |   | و           |
| 2.       | The complete street and mailing addresses of the principal office is:  |   |                |                       |   | : 44        |
|          | 3791 S MAZE PL BOISE IDAHO 83706   |   |                |                       |   | 4           |
|          | (Street Add  | 201000 NOTE   100 100 100 100 100 100 100 100 100 1 | 37 (110 007 00 |                       |   | <del></del> |
|          |  |   |                |                       |   |             |
|          | (Mailing Address, if different)  |   |                |                       |   | 지<br>***    |
| 3.       | . The name and complete street address of the registered agent:  |   |                |                       |   | Ceiv        |
|          | PEGGY DUFFY 3791 S MAZE PLACE BOISE ID 83706   |   |                |                       |   | <u> </u>    |
|          | (Name)   | I DUFFT   | (Address)      | ZE PLACE BO           | 13E 1D 03700                            | <u> </u>    |
| 4.       | The name and address of at least one governor of the limited liability company:  |   |                |                       |   | Λq          |
| 7.       |  |   |                |                       |   | Н           |
|          | PEGGY DUFFY 3791 S MAZE PLACE BOISE ID 83706  (Name) (Address)   |   |                |                       |   | Ü           |
|          | (Hame)   |   | (Filodress)    |                       |   | S           |
|          | •••  |   |                |                       |   | Ü           |
|          | (Name) (Address)   |   |                |                       |   | Ó           |
|          |  |   |                |                       |   | etar        |
|          | (Name)   |   | (Address)      |                       |   |             |
|          |  |   |                |                       |   | 0<br>Hi     |
|          | (Name) (Address)   |   |                |                       |   | Ø           |
| 5        | 5. Mailing address for future correspondence (annual report notices):  3791 S MAZE PLACE BOISE ID 83706  (Mailing Address) |   |                |                       |   | <b>18</b> 1 |
| J.       |  |   |                |                       |   | Ct<br>O     |
|          |  |   |                |                       |   |             |
|          |  | ~   |                |                       |   | awer        |
| Sign     | ature of or  | ganizer(s).   |                |                       |   | 9           |
| Print    | Printed Name: PEGGY DUFFY Secretary of State use only  |   |                |                       |   |             |
|          | _  |   |                |                       |   | ence        |
| Sign     | ature:   | for Wellson   | X              |                       |   | ū           |
|          |  | Jan 1   | 11/            |                       |   | E T         |
| Print    | ed Name:   | <del></del>   |                |                       |   | Denney      |
| Sign     | ature:   |   |                |                       |   | ~~          |