

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

(Instructions on back of application)

2014 DEC -5 PM 4: 53

(modulation on	back of application)	SECNETARY OF STATE
1. The name of the limited liabilit	The name of the limited liability company is:	
Cabin Loft Creatives LLC		STATE OF IDAHO
The complete street and mailing     2695 N Shoveler Way Meridian, Id     (Street Address)	~	tial designated office:
(Mailing Address, if different than street add	ress)	
<ol><li>The name and complete street</li></ol>	address of the registe	ered agent:
Kenrick Barkell	2695 N Shoveler	Way Meridian, Id 83646
(Name)	(Street Address)	
<ol> <li>The name and address of at le company:</li> <li>Name</li> </ol>	ast one member or ma	anager of the limited liability  Address
Kenrick Barkell	2695 N Shoveler	Way Meridian, Id 83646
5. Mailing address for future corrections 2695 N Shoveler Way Meridian, Id	•	eport notices):
2095 N Snoveler vvay Meridian, Id	83040	
6. Future effective date of filing (d	optional):	
<b>5</b> (		
Signature of a manager, membererson.	er or authorized	Secretary of State use only
Signature /		IDAHO SECRETARY OF STATE
Typed Name: Kenrick Barkell		12/08/2014 05:00 CK:2408770 CT:172039 BH:145 10 100.00 = 100.00 ORGAN LL
Signature		
Typed Name:		N14F142
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