

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

11 MAY -9 AM 9: 22

(Instructions on back of application)

<b>ZPP</b>	SECRE LIBY OF STATE
nv is:	STATE OF IDAHO

1. The name of the limited liability company Cinderella's Closet, LLC 2. The complete street and mailing addresses of the initial designated/principal office: 3050 Silver Circle Idaho Falls, ID 83401 (Street Address) (Mailing Address, if different than street address) 3. The name and complete street address of the registered agent: 3050 Silver Circle Idaho Falls, ID 83401 Cheri L. Austin (Name) (Street Address) 4. The name and address of at least one member or manager of the limited liability company: <u>Name</u> <u>Address</u> 3050 Silver Circle Idaho Falls, ID 83401 Cheri L. Austin 5. Mailing address for future correspondence (annual report notices): 3050 Silver Circle Idaho Falls, ID 83401 6. Future effective date of filing (optional): Signature of a manager, member or authorized person. Secretary of State use only Signature Typed Name: Cheri L. Austin Signature\_\_\_ Typed Name: \_\_\_\_\_\_

cert\_org\_lic Rev. 07/2010

W103/48