

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 MAR 10 AM 10: 09

<b>(</b> 2.1.1.1.2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	,,,	Property.
1. The name of the limited liability company is:		SECRETARY OF STATE
Amor Clothing & Accessories, LC STATE OF DARD"		
The complete street and mailing addresses of the initial designated office:		
1255 Double Egyle Ciz. (Street Address)	Preston, IO	83263
(Mailing Address, if different than street address)		
The name and complete street address of the registered agent:		
Emilee Phillips (Name)	(Street Address)	e CIR. Preston, ID 83263
The name and address of at least one member or manager of the limited liability company:		
Name Name		idress
Emilee Phillips Ande Phillips	1255 Double Eagle	CIR. Preston, ID 83212
Ande Phillips	1255 Double Eag	Ve Cir. Preston, In 8324
	<u> </u>	
5. Mailing address for future correspondence (annual report notices):		
1255 Double Fagle Cir. Preston, IO 83263		
6. Future effective date of filing (optional):		
Signature of a manager, member or authorized person.		
A Out to		Secretary of State use only
Signature & Mill YM Ups		
Typed Name: Emiles Phillips		
Signature		
SignatureTyped Name:		IDAHO SECRETARY OF STATE
		03/10/2014 05:00 CK: 124 CT: 284419 BH: 1414408

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