

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

11 JUL -6 PM 3:13

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Mystic Haze, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

14450 N. Vintage Way
(Street Address)Nampa, ID 83651
(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Kings Sauty
(Name)14450 N. Vintage Way Nampa
(Street Address) ID 83651

4. The name and address of at least one member or manager of the limited liability company:

Kings Sauty
Name14450 N. Vintage Way Nampa
Address ID 83651

5. Mailing address for future correspondence (annual report notices):

Same as Above

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Kings Sauty
Typed Name: Kings SautySignature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
07/06/2011 05:00
CK: CASH CT: 212032 BH: 1201362
1 @ 100.00 = 100.00 ORGAN LLC # 2

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