

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 SEP 13 AM 8: 24

1.	The name of the limited liability cor	npany is: SECRE ORY OF STATE STATE OF IDAHO S SALON & SPA, LLC
2.	120 N. EMERSON SHELLEY, IDAHO 83274	
3.	(Street Address) (Mailing Address, if different than street address) The name and complete street address of the registered agent:	
	ERICA ELLSWORTH (Name)	120 N. EMERSON SHELLEY, IDAHO 83274 (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>
	ERICA ELLSWORTH	120 N. EMERSON SHELLEY, IDAHO 83274

6. Future effective date of filing (optional):

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

Signature of a manager, member or authorized person.

120 N. EMERSON SHELLEY, IDAHO 83274

Signature Frica ENSWOYTH

Typed Name: ERICA ELLSWORTH

Signature_____

Typed Name: _____

Secretary of State use only

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09/13/2010 05:00
CK: 103229 CT: 251105 BH: 1230624
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