

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

	(Instructions on bac	k of application)	2014 AUG 19 AM 8: 35
1.	The name of the limited liability co	mpany is:	SECRETATION STATE STATE OF DOMO
2.	The complete street and mailing ac 3685 N Bottle Brush Ave Boise II (Street Address)		itial designated office:
3.	(Mailing Address, if different than street address) The name and complete street address of the registered agent:		
	Chris Hogan (Name)	3685 N Bottle Bra (Street Address)	ush Ave Boise ID 83713
4.	The name and address of at least one member or manager of the limited liability company:		
	Name Chris Hogan	Address 3685 N Bottle Brush Ave Boise ID 83713	
5.	Mailing address for future correspo	•	eport notices):
6.	Future effective date of filing (optio	nal):	
	nature of a manager, member o	r authorized	
•	nature <u>Chris HOgan</u> ed Name: Chris Hogan		Secretary of State use only IDANO SECRETARY OF STATE 08/19/2014 05:00 CK:2956 CT:300241 BH:143789:
Sigi	nature		16 100.00 = 100.00 ORGAN LLC
Typed Name:			W141283

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