

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

08 APR -1 PN 3: 29

(Instructions on back of application)

1 The name of the limited liebility		SECRETARY OF STATE
 The name of the limited liability Flower of Life L.L.C. 	y company is:	State of Idaho
Flower of Life L.L.C.		
2. The street address of the initial	registered office is:	
1712 N. 12th St. Boise, Idaho	i e	
and the name of the initial regis	tered agent at the ab	
Ben Stuckey	tered agent at the ap	ove address is:
3. The mailing address for future of	correspondence is:	
1712 N. 12th St. Boise, Idaho	83702	
4. The limited liability company wil	l be:	
Manager-managed ✓ or Me	•	
Wanager Manager [F] Of Me	inber-managed [(please check the appropriate box)
5. If manager-managed, list the na	me(s) and address(e	s) of at least one initial manager
If member-managed, list the nar	ne(s) and address(es	s) of at least one initial member.
<u>Name</u>		Address
Ben Stuckey	4740 N. 404- O	.
	17 12 N. 12th St	Boise, Idaho 83702
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	•	
6. Signature of at least one person	responsible for formi	no the Bustines D. E. W.
o and the person	responsible for forming	ig the limited liability company:
Signature:		
Typed Name: Ben Stuckey	Ed 103	Secretary of State use only
Capacity: President	genize	
	artsofor	
Signature	formular 05/2007	IDAHO SECRETARY OF STATE
Typed Name:	orms/LLC	N4761/2008 05:00
Capacity:		1 @ 100.00 = 100.00 ORGAN LLC #

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