



CERTIFICATE OF ORGANIZATION **FILED EFFECTIVE**
LIMITED LIABILITY COMPANY

(Instructions on back of application)

1. The name of the limited liability company is:

The Espresso Cottage LLC

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

329 N. Middleton Rd. Nampa Id. 83651
 (Street Address)

Same
 (Mailing Address, if different than street address)

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

Charity Fay
 (Name)

329 N. Middleton Rd. Nampa Id. 83651
 (Street Address)

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

Charity Fay

329 N. Middleton Rd. Nampa 83651

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

"SAA"

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

Signature of a manager, member or authorized person.

Signature Charity Fay
 Typed Name: Charity Fay

Signature _____
 Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
 11/07/2012 05:00
 CK: 160 CT: 276038 BH: 1346860
 1 @ 100.00 = 100.00 ORGAN LLC # 2