

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application)

10 MAY -5 AM 8: 16

1. The name of the limited liability company is:

SECRETARY OF STATE
STATE OF IDAHO

	The Woman Angler, ELC		
2. The complete street and mailing	g addresses of the initial	designated/princ	cipal office:
	5 Blossom Pl., Meridian ID 836		
(Street Address)			
78 Spilling Address 16 stff			
(Mailing Address, if different than street addr	,		
3. The name and complete street	address of the registered	l agent:	
Danielle Darragh	2005 Blosso	m Pi., Meridian ID 8	3646
(Name)	(Street Address)		:
The name and address of at leacompany:	ast one member or mana	ger of the limited	l liability
Name	Address		
Danielle Darragh	2005 Blosso	2005 Blossom Pl., Meridian ID 83646	
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			e de la companya de l
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<ul> <li>Mailing address for future corres</li> </ul>	spondence (annual repor	t notices):	
Future effective date of filing (or	otional):		
ignature of organizer(s). (An organize	ris a member oris		
eting in behalf of a member or members).			
	Q	Secretary of State	use only
ignature <u>Minulle</u> Outest	E.PM	·	
yped Name: Danielle Darra	agh		
	18)Cert	IDAHO SECI	RETARY OF STATE
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yped Name:	E A		

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