

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

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CERTIFICATE OF	ORGANIZATION	2013 MAY 20 AM 10:07
LIMITED LIABIL	ITY COMPANY	COLINAL CFFECT
(Instructions on ba	ck of application)	SEC. 120 11
The name of the limited liability c	ompany is	57 0.02
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LENORA'S CUSTOM CABINET 2. The complete street and mailing a		
1555 HWY 13 GRANGEVILLE		signated office.
(Street Address)	15. 63530	
(Mailing Address, if different than street address	1	
3. The name and complete street ad	Idress of the registered ag	jent.
LENORA G. AKIN	1555 HWY 13 GRAN	GEVILLE ID. 83530
((Street Address)	
4. The name and address of at least	one member or manager	of the limited liability
company:	•	
<u>Name</u>	_	ddress
LENORA G. AKIN	1555 HWY 13 GR	ANGEVILLE ID. 83530
	_	
and the second s		
- 44 33		
5. Mailing address for future corresp	•	otices):
1555 HWY 13 GRANGEVILLE	ID. 83530	
6. Future effective date of filing (opti	onal):	
o. Tatare encouve date of ming (opti	Origin.	
Signature of a manager, member	or authorized	
person.		
		Secretary of State use only
Signature 2		
Typed Name: LENORA G. AKIN		
a :		
Signature		
Typed Name:		
	cenjorg la Revi 270010	_ IDAHO SECRETARY OF STATE

05/20/2013 05:00 CK: 1991 CT: 207913 BH: 1374505 1 8 100.00 = 100.00 ORGAN LLC # 2

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