CERTIFICATE		
LIMITED LIA	OF ORGANIZATION	FILED EFFECTIVE 2015 FEB 27 PM 4= 41
(Instructions	on back of application)	SECRETARY OF STATE
1. The name of the limited liat	bility comp an y is:	STATE OF IDAHO
Scorpion Tattoo, LLC		
2. The complete street and ma 1530 Vernon St., Blackfoot, Idal (Birest Address)	ailing addresses of the initial des no 83221	ignated office:
(Mailing Address, if different than street	1 address)	
3. The name and complete stre	reet address of the registered ag	ent:
Jennifer Moon	1530 Vernon St., Blackfoo	t, Idaho 83221
(Name)	(Street Address)	
company:	It least one member or manager	-
<u>Name</u> James Wheeler	<u>م</u> 1530 Vernon St., Blackfoo	<u>tidrese</u> t Idaho 83221
5. Mailing address for future co 1530 Vernon St., Blackfoot, Ida	orrespondence (annual report no	otices):
1530 Vernon St., Blackfoot, Ida		
1530 Vernon St., Blackfoot, Ida	no 83221	
1530 Vernon St., Blackfoot, Idal 6. Future effective date of filing Signature of a manager, men person. Signature	no 83221	
1530 Vernon St., Blackfoot, Idal 6. Future effective date of filing Signature of a manager, men person.	no 83221	Secretary of State use only IDAHO SECRETARY OF STATE
1530 Vernon St., Blackfoot, Idal 6. Future effective date of filing Signature of a manager, men person. Signature Typed Name: James Wheeler	nho 83221 g (optional): mber or authorized	Secretary of State use only IDAHO SECRETARY OF STATE 02/27/2015 05:00
1530 Vernon St., Blackfoot, Idal 6. Future effective date of filing Signature of a manager, men person.	no 83221 g (optional): mber or authorized	Secretary of State use only IDAHO SECRETARY OF STATE