## FILED EFFECTIVE



## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 10 007 -4 AM 10: 02

it i	(Instructions on back	of application)	SECRET DV OF ATIO
1.	The name of the limited liability com	npany is:	SECRETARY OF STATE STATE OF IDAHO
	-	Thyme Out, LLC	
2.	The complete street and mailing add 8414 Teal Trail, Victor, Idaho 83455  (Street Address)	Iresses of the initia	al designated/principal office:
	(Mailing Address, if different than street address)		
3.		ess of the registers	ed agent:
J.	The name and complete street address of the registered agent:		
	United States Corporation Agents, Inc.		Road, Meridian, ID 83642
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name		<u>Address</u>
	Stacey Rosati	8414 Teal Trail, Vict	or, Idaho 83455
5.	Mailing address for future correspon c/o: 8414 Teal Trail, Victor, Idaho 83455	dence (annual rep	ort notices):
6.	Future effective date of filing (optional):		
	nature of a manager, member or son.	authorized	
•	nature		Secretary of State use only
Tvr	ped Name: Karla Figueroa, Legalzoom.co	om, Inc.	
- 31	<del></del>		IDAHO SECRETARY OF STATE
Sig	nature		CK: 484504 CT: 167623 RH: 1241542
Тур	oed Name:		1 8 100.00 = 100.00 DRGAN LLC # 2 1 8 20.00 = 20.00 EXPEDITE C #

cert\_org\_ltc Rev. 07/2010

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