

Typed Name:

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 JUL 23 AM 10: 18

SECRET - 17 CF STATE STATE CF IDAHO

1. The name of the limited liability company is:		STATE OF DAHO
	LadySpade & Co., LLC	
	nailing addresses of the initial design 6264 N Hill Point Way Star, Idaho 83669	ated/principal office:
(Street Address)	otal, idano 00009	
(Mailing Address, if different than stre	et address)	
	treet address of the registered agent	;
Michael McKown	6264 N Hill Point Way (Street Address)	Star, Idaho 83669
	(Street Address)	
The name and address of a company:	at least one member or manager of t	he limited liability
<u>Name</u>	Addre	<u>ss</u>
Michael McKown	6264 N Hill Point Way	Star, Idaho 83669
5. Mailing address for future c	orrespondence (annual report notice	s):
	7721 Settlers Ave Boise, Idaho 83704	-7-
6. Future effective date of filing	g (ontional):	
or rate of one of the date of filling	g (optional).	
Signature of organizer(s). (An org	anizer is a member, or is	
acting in behalf of a member or memb		-1
Signature Manna	lic PMD	etary of State use only
Typed Name:Michael	McKown ខ្លឹ	
Signature	McKown mskILC formshoert_org_lic.PMD vised 07/2008	IDAHO SECRETARY OF STATE 97/23/2008 95:00
Typed Name:	mastLl	1

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