







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney CERTIFICATE OF ORGANIZATION LIMITED LIABILITY **COMPANY**

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00

For Office Use Only

-FILED-

File #: 0004474201

Date Filed: 11/1/2021 11:38:18 AM

| Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (see descriptions below) | | Standard (filing fee \$100) | |
|--|---------------------------|---|--|
| 1. Limited Liability Company Name | | | |
| Type of Limited Liability Company | | Limited Liability Company | |
| Entity name | | DeCoeur Designs LLC | |
| 2. The complete street address of the principal of | fice is: | | |
| Principal Office Address | | CODY HANSON | |
| | | 4352 N SHELBURNE LOOP | |
| | | POST FALLS, ID 83854 | |
| 3. The mailing address of the principal office is: | | | |
| Mailing Address | | CODY HANSON 4352 N SHELBURNE LOOP | |
| | | POST FALLS, ID 83854-0133 | |
| | | | |
| 4. Registered Agent Name and Address | | Degistered Agent | |
| Registered Agent | | Registered Agent Cody Hanson | |
| | | Physical Address: | |
| | | 4352 N SHELBURNE LOOP | |
| | | POST FALLS, ID 83854 | |
| | | Mailing Address: CODY HANSON | |
| | | 4352 N SHELBURNE LOOP | |
| | | POST FALLS, ID 83854-0133 | |
| I affirm that the registered agent a | appointed has consented t | o serve as registered agent for this entity. | |
| Name | | Address | |
| Cody Hanson | | 4352 N SHELBURNE LOOP POST FALLS, ID 83854 | |
| Signature of Organizer: | | | |
| | | | |
| Cody Hanson | | 11/01/2021 | |