

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2015 JAN 20 AM 10: 33

1.	The name of the limited liability of	ompany is:	SE(CRETARY OF STATE
	AMANDA RENE PHOTOGRAPHY, LL.	3		- IOAHO
2.	The complete street and mailing addresses of the initial designated office: 311 N.RIVER ST #4, HAILEY, ID 83333			
	(Street Address) PO BOX 2029, HAILEY, ID 83333			
	(Mailing Address, if different than street address)			
3.	The name and complete street address of the registered agent:			
	AMANDA R NAGY	311 N.RIVER ST #4, HAILEY, ID 83333		3
	(Name)	(Street Address)		
	Mame AMANDA R NAGY	_	Address MAILING: PO BOX 2029, HAILEY, ID 83333	
		MAILING: PO		
		PHYSICAL: 311 N.RIVER ST #4, HAILEY, ID 83333		
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⊅.	Mailing address for future corresp PO BOX 2029, HAILEY, ID 83333	ondence (annu	al report notices):	
6.	Future effective date of filing (option	onal):		
	nature of a manager, member of son.	or authorized		
			Secretary of	State use only PRETARY OF STATE
Sigi	nature <u>Amanda RN</u> ag	ry		2015 05:00
уp	ed Name: AMANDAR NAGY	' 0	CK:1441 CT:	305371 BH:1457844 .00.00 ORGAN LLC :
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ognature			W 146756	

cert_org_lic Rev. 07/2010

Typed Name: ____

9/21/2012