

CERTIFICATE OF ORGANIZATION

	LIMITED LIABILIT	Y COMPANY 09 MAR	31 AM 8: 04
	(Instructions on back of	of application)	FADY AS OTATE
1. The	name of the limited liability comp	pany is: STAT	TARY OF STAT E E OF IDA HO
	Krazy Coupon Lad.	1 LLC	
2. The	complete street and mailing addi	resses of the initial designated/pri	ncipal office:
(Str	518 E. 4th St. Emme eet Address)	H, 10 83417	
(Ma	illing Address, if different than street address)		
3. The	name and complete street addre	ss of the registered agent:	
ļ (Ne	teather wheeler	518 E. 4th St. En (Street Address)	nmett, 10 83
	name and address of at least on npany:	e member or manager of the limit	ed liability
	Name	Address U.S. C. Paris	
	Joanie Demer Teather Wheeler	1915 E. Hays 31. 10016	<u>e 10 831</u> 12
<u>_</u>	teather wheeler	510E 4th St. Emm	ett 10 8361
 5. Mai	ling address for future correspond	lence (annual report notices):	
	ling address for future correspond		
		ID 83617	2.35

acting in behalf of a member or members).

Signature Joans Denser

Typed Name: Joanie Demer Signature <u>Beather Wheeler</u> Typed Name: <u>Heather Wheeler</u>

Secretary of State use only

IDAHO SECRETARY OF STATE @3/31/2009 @5:00 CK: 1488 CT: 234881 BH: 1163788 1 8 188.88 = 168.88 CRGAN LLC # 2