



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

12 JAN -4 AM 11:48

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

ATF Catering, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

5466 N Saguardo Hills Ave
(Street Address)

Mendian Id 83646
(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Alexi Faucher 5466 N Saguardo Hills Ave
(Name) (Street Address) Mendian, Id 83646

4. The name and address of at least one member or manager of the limited liability company:

| <u>Name</u> | <u>Address</u> |
|----------------------|-----------------------------------|
| <u>Alexi Faucher</u> | <u>5466 N. Saguardo Hills Ave</u> |
| _____ | <u>Mendian, Id 83646</u> |
| _____ | _____ |
| _____ | _____ |

5. Mailing address for future correspondence (annual report notices):

same

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Alexi T Faucher
Typed Name: Alexi T Faucher

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
01/04/2012 05:00
CK: 1177 CT: 265586 BH: 1304416
1 @ 100.00 = 100.00 ORGAN LLC # 2

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