

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 JUN 25 AM 11: 29

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability of	company is:	STATE OF IDAHU
	sic skins LLC		
2.	The complete street and mailing addresses of the initial designated/principal office:		
	753 e huckleberry ct, kuna, ID 83634		
	(Street Address)		
	(Mailing Address, if different than street address	;)	
3.	The name and complete street address of the registered agent:		
	Mandy L Waltemate		ct, Kuna, ID 83634
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>	<u>Address</u>	
	Mandy L Waltemate	753 E Huckleberry Ct., Kuna, ID 83634	
			
5.	Mailing address for future correspondence (annual report notices):		
	753 E Huckleberry ct., Kuna, ID 83634		
6.	Future effective date of filing (opti	onal):	
Sig	nature of organizer(s). (An organizer	is a member, or is	
acti	ng in behalf of a member or members).		Secretary of State use only
Sig	nature MAWalte	Stroopstomstuc formstoert_org_fc.PMD Revised 07/2008	occided of order doc only
Тур	ped Name/ <u>mandy L Wall</u>	emate &	TANKS SESSETABLY OF STATE
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