

CERTIFICATE OF ORGANIZATION LED EFFECTIVE LIMITED LIABILITY COMPANY

HAIR 12 AM O. O.

₹	(Instructions on back	or application)	15 HU 3: 01
1.	The name of the limited liability com	npany is:	ECA BY OF STATE STATE OF IDAHO
2.	The complete street and mailing add 8596 N Wayne Dr. Suite B Hayden, ID 8		gnated/principal office:
	(Street Address)		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Kenneth T. Dorris	8596 N Wayne Dr. Suite B	Hayden, ID 83835
	(Name)	(Street Address)	
	The name and address of at least or company:		
	Name Kenneth T. Dorris	8596 N Wayne Dr. Suite B	dress Havden ID 83835
	, 1, 1, 1,		
	Ted Presley	8596 N Wayne Dr. Suite B	Hayden, ID 83835
			-
5.	Mailing address for future correspon	•	tices):
	8596 N Wayne Dr. Suite B Hayden, ID 8	33835	
6	Future effective date of filing (option	al\:	
Ο.	ruture enective date or filling (option	ai)	
Siai	nature of a manager, member or	authorized	
pers	-	uutii 125u	·
O!	Last-		Secretary of State use only
_	nature Kenneth T. Dorris		
ıyp	ed Name: Kenneth 1. Dorris		IDAHO SECRETARY OF STATE
Siar	nature Assert		CK: 5209 CT: 239338 BH: 1286221 1 @ 100.00 = 100.00 ORGAN LC #
-	ed Name: Ted Presley		1 @ 20.00 = 20.08 EXPEDITE C
. 7 P	94 HUITO		

W/05781