

Printed Name:

Signature: \_

Rev. 01/2018

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Base Filing fee: \$100.00 typed, \$120 not typed 2018 JUL 30 AM 8: 50

Complete and submit the application in <u>duplicate</u> .		SECRETARY OF STATE STATE OF IDAHO	
The name of the limited liab	oility company is:	•	
Your Travel Moments LL	С		
(Remember to include the	e words "Limited Liability Company," "Limited Company	, "or the abbreviations L.L.C., LLC, or LC)	
The complete street and ma	ailing addresses of the principal office is:		
731 Aberdeen Drive, Na	, ,		
Street Address)	<del>при 12 - 22222</del>		
PO Box 907, Nampa ID	83653		
Mailing Address, if different)			
<b>-</b>			
·	reet address of the registered agent:		
Kim K Lewis	731 Aberdeen Drive, Na	ampa ID 83686	
Name)	(Address)	******	
David Lewis	at least one governor of the limited liability 731 Aberdeen Drive, Na	731 Aberdeen Drive, Nampa ID 83686	
Name)	(Address)		
,	(viga ess)		
Mailing address for future of	correspondence (annual report notices):		
PO Box 907, Nampa ID			
(Address)			
ture of organizer(s).			
d Name: Kim K Lewis		Secretary of State use only	
d Name.	<del></del>		
ture: Kim K		IDAMO SECRETARY OF STATE	
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07/31/2016 05:00

CK:127 CT:231404 BH:1656430 10 100.00 = 100.00 ORGAN LLC #2

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