



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014 DEC -8 AM 10:09

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

The Stinky Blanket LLC

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

285 W. Judicial Suite A  
(Street Address)

Blackfoot, ID 83221  
(Mailing Address, if different than street address)

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

Gayle Hoover 646 S. University  
(Name) (Street Address)

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

Name	Address
<u>Gayle Ann Hoover</u>	<u>646 S. University Bldg, ID 83221</u>
_____	_____
_____	_____
_____	_____

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

646 S. University Blackfoot, ID 83221

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature Gayle Ann Hoover  
Typed Name: \_\_\_\_\_

Signature \_\_\_\_\_  
Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

12/08/2014 05:00

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