



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2013 JUN -7 AM 8:45

1. The name of the limited liability company is:

Eyes By Erin LLC

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

2105 Alan St #7

(Street Address)

Idaho Falls ID 83404

(Mailing Address, if different than street address)

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

Erin McAbery

(Name)

2105 Alan St #7 Idaho Falls ID 83404

(Street Address)

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

Name

Address

Erin McAbery

2105 Alan St #7 Idaho Falls ID 83404

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

2105 Alan St #7 Idaho Falls ID 83404

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

Signature of a manager, member or authorized person.

Signature Erin McAbery
Typed Name: Erin McAbery

Signature _____
Typed Name: _____

Secretary of State use only

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06/07/2013 05:00
CK: 129 CT: 204042 BH: 1377187
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