



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

 Complete and submit the application in duplicate.

2016 MAY -5 PM 1:52
**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:
Ambrosia LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:
3580 Red Cliff Blvd #A Idaho Falls, ID 83401

(Street Address)

PO Box 473 Ucon, ID 83454

(Mailing Address, if different)

3. The name of the registered agent and the street address of the registered agent:
Amber Nette Holst 3580 Red Cliff Blvd #A Idaho Falls, ID 83401

(Name)

(Address cannot be a post office box or postal mail box.)

4. The name and address of at least one governor of the limited liability company:
Amber Nette Holst PO Box 473 Ucon, ID 83454

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):
PO Box 473 Ucon, ID 83454

(Address)

Signature of organizer(s):

Signature:

Printed Name: Amber Nette Holst

Signature:

Printed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

05/05/2016 05:00

CK:6079 CT:324063 BH:1527089

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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