



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 NOV 19 AM 8:41

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

GET_R_DONE ESPRESSO, LLC

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

30 West Founder St.

(Street Address)

Saint Maries ID 83861

(Mailing Address, if different than street address)

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

InCorp Services, Inc.

(Name)

921 S. Orchard Street, Suite G Boise, ID 83705

(Street Address)

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

Name

Address

Christina Fuller

30 West Founder St. Saint Maries, ID 83861

Miranda Ascencio

2078 Charlie Creek Rd Saint Maries, ID 83861

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

30 West Founder St. Saint Maries, ID 83861

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Jamie Bay

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

11/19/2015 05:00

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