

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

09 JUN 26 AM 8: 17

VE ?	(Instructions on bac	ck of application)	SECRETARY OF STATE STATE OF IDAHO	
1.	The name of the limited liability co	ompany is:	STATE OF DATO	
	Twisted Timber F	ine Furniture & Custom Cabinetry	, LLC	
2.	The complete street and mailing addresses of the initial designated/principal office: 17037 N. Lyonsdale Place, Nampa, ID 83687			
	(Street Address)			
	(Mailing Address, if different than street address)			
3.	The name and complete street address of the registered agent:			
	Michael R. Schwartz	17037 N. Lyonsdale Pla	ce, Nampe, ID 83687	
	(Name)	(Street Address)		
4.	The name and address of at least one member or manager of the limited liability company:			
	Name		<u>Address</u> 17037 N. Lyonsdale Place, Nampa, ID 83687	
	Michael R. Schwartz	17037 N. Lyonsdale Pla	ce, Nampa, ID 83887	
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		<u> </u>		
5.	Mailing address for future correspond	ondence (annual report notic	es):	
	17037 N. Lyonsdale Place, Nampa, ID 83687			
6.	Future effective date of filing (option	onal):		
_	nature of organizer(s). (An organizer is	s a member, or is		
actir	ng in behalf of a member or members).	Se	ocretary of State use only	
Sia	nature Am Tube			
_	ded Name: Gary D. Luke			
' <b>J</b> F	y say = 1200		TRAIN SPORTING OF STATE	
Sig	nature	ALC formstoort org. Je. PMD d 07/2008	19940 SECRETARY OF STATE 06/26/2009 05:06 CX: 4874 CT: 150736 BN: 117649	
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