

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY SEP 30 AM 9: 13

(Instructions on back of application)

SECRETARY OF A-
1. The name of the limited liability company is: SECRETARY OF STATE STATE OF IDAHO
This faced of fabulous LLC.
2. The complete street and mailing addresses of the initial designated office:
(Street Address)
(Mailing Address, if different than street address)
The name and complete street address of the registered agent:
Hamin Vanscay 36085 Solativ Pl. Meridian ID (Street Address)
 The name and address of at least one member or manager of the limited liability company:
Hannah Vanslay 3668 S. Selativ Pl. Mevidian ID
5. Mailing address for future correspondence (annual report notices): 3668 5. Selativ Pl. Mevidian ID 83642
6. Future effective date of filing (optional):
Signature of a manager, member or authorized person.
Signature Manuel Conscord Secretary of State use only Typed Name: Hannah Vanscord

IDAHO SECRETARY OF STATE 09/30/2013 05:00 CK: 4788 CT: 135923 BH: 1392657 1 8 189.00 = 180.00 ORGAN LLC # 2

W129705

Signature____

Typed Name: ____