

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2009 JAN 28 PM 2: 08

STATE OF IDAHO

1. The	name of the limited liability com	pany is:		į
	Joe's	s Coffee Corner,	rrc	
2. The	. The complete street and mailing addresses of the initial designated/principal office:			
	415 6th Str	eet, Lewiston, Ide	aho 83501	
(Stre	eet Address)	<u> </u>		-
(Mai	lling Address, if different than street address)			-
3. The	name and complete street addre	ess of the regis	stered agent:	•
	Sherrie Wassmuth	1510	Alder Ave. Lewiston, ID 83501	<u>.</u>
(Na	me)	(Street Address)		- -
	name and address of at least or pany:	ne member or i	manager of the limited liability	
	Jerry Wassmuth	1510 Alder Ave., Lewiston, ID 83501		
		Participation of the second of		-
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5. Mail	ing address for future correspon	dence (annual	report notices):	
	Sherrie Wassmuth	510 Alder Ave.,	Lewiston, ID 83501	-
6. Futu	re effective date of filing (options	al):	ر المراجعة المراجعة 	• .
	e of organizer(s). (An organizer is a	member, or is		
acung in c	pehalf of a member or members).		Secretary of State use only	•
Signatur	e Jeny Varmus			
Typed N	ame. Jerry Wasemuth			
	00	, or other		
Signatur		plomatic femiliant or A. Pulb	IDAHO SECRETARY OF STA	ATE 5 = 00
Typed Ñ	ame: Sherrie Wassmuth	Linoy, diversi	CK: 102 CT: 233568 BH: 1 1 0 180.00 = 100.00 DRGA	l 154317