

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

08 SEP -3 AM 11:54

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

W77385

1. The name of the limited liability con	npany is: STATE OF IDAHO
Ar	nytime Edibles, LLC
2. The complete street and mailing add	dresses of the initial designated/principal office:
	emory Ln. Meridian, ID 83642
(Street Address)	ox 616, Kuna, ID 83634
(Mailing Address, if different than street address)	
3. The name and complete street addr	ress of the registered agent:
Norman Johnson	3601 S. Memory Ln. Meridian, ID 83642
(Name)	(Street Address)
company:	one member or manager of the limited liability
<u>Name</u> Norman Johnson	Address
Norman Johnson	3601 S. Memory Ln. Meridian, ID 83642
Jamie Johnson	3601 S. Memory Ln. Meridian, ID 83642
5. Mailing address for future correspon	ndence (annual report notices): ox 616, Kuna, ID 83634
6. Future effective date of filing (option	nal):
Signature of organizer(s). (An organizer is a acting in behalf of a member or members).	a member, or is
	Secretary of State use only
Signature Naman Alusa	
Typed Name: Morman Johnson	
Signature January Jamie Johnson	IDAHO SECRETARY OF STATE SOUTH