



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2012 JUN -5 AM 8:49

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Susies' Shaved Ice LLC

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

24047 Batt Corner Rd., Parma, ID 83660

(Street Address)

(Mailing Address, if different than street address)

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

Susan Hansen

(Name)

24047 Batt Corner Rd. Parma, ID 83660

(Street Address)

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

Name

Address

Susan Hansen

24047 Batt Corner Rd. Parma, ID 83660

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

24047 Batt Corner Rd. Parma, ID 83660

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Susan Hansen

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
06/05/2012 05:00
CK: 3030 CT: 271120 BH: 1326929
1 @ 100.00 = 100.00 ORGAN LLC # 2

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