





STATE OF IDAHO
Office of the secretary of state, Lawerence Denney
CERTIFICATE OF ORGANIZATION LIMITED LIABILITY
COMPANY

Ideho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 -FILED-

File #: 0004625304

Date Filed: 2/28/2022 3:20:51 PM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service ( descriptions below)	(see Standard (filling fee \$100)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	WICKED VANITY BEAUTY LLC
2. The complete street address of the principal office is:	
Principal Office Address	2770 CARRIAGE WAY TWIN FALLS, ID 83301
	(WIN PALLS, ID 83301
3. The mailing address of the principal office is:	
Mailing Address	2770 CARRIAGE WAY TWIN FALLS, ID 83301-5257
4. Registered Agent Name and Address	199417423,10 0001-0201
Registered Agent	Registered Agent TIFFANI NELSON Physical Address: 2770 CARRIAGE WAY TWIN FALLS, ID 83301 Mailing Address: 2770 CARRIAGE WAY
I affirm that the registered agent appointed has con	TWIN FALLS, ID 83301-5257 sented to serve as registered agent for this entity.
I affirm that the registered agent appointed has con	,
	,
6. Governors	sented to serve as registered agent for this entity.
6. Governors Name	sented to serve as registered agent for this entity.  Address  2770 CARRIAGE WAY
6. Governors  Name  TIFFANI NELSON  Signature of Organizer:  Sign Here	Address 2770 CARRIAGE WAY TWIN FALLS, ID 83301
Sign Here	Address  2770 CARRIAGE WAY TWIN FALLS, ID 83301  3-1-72 Date
6. Governors  Name  TIFFANI NELSON  Signature of Organizer:  Sign Here  Print & Mail Enclosures  I understand the document can ONLY be filed if the	Address  2770 CARRIAGE WAY TWIN FALLS, ID 83301  3-1-72 Date
Signature of Organizer:  Sign Here  Tirf & Mail Enclosures  I understand the document can ONLY be filed if the Payment in the amount of \$100.00 (if expedited, \$14	Address  2770 CARRIAGE WAY TWIN FALLS, ID 83301  3- 1- ZZ  Date  o following items are included:  0; if 24 hours processing, \$200) - checks payable to the Secretary of

## STATEMENT OF DOMESTICATION

1. Name, jurisdiction and type of the domesticating entity:

Name: WICKED VANITY BEAUTY LLC

Jurisdiction: OREGON
Type of Entity: LLC

2. Name, jurisdiction and type of the domesticated entity:

Name: WICKED VANITY BEAUTY LLC

Jurisdiction: IDAHO Type of Entity: LLC

3. Effective date of domestication:

X Upon filing

(This date may not be more than ninety (90) days after the date of filing.)

- 4. X the domesticating entity is a foreign entity, and the domestication is approved in accordance with the law of its jurisdiction of organization.
- 5. X the domesticated entity is a domestic filing entity and the text of its public organic document is shown in the document attached to this statement of domestication.

Signature of Domesticating Entity:

**TIFFANI NELSON** 

Print name