

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2017 SEP -1 PM 4 44

SECRETARY OF STATE

| 1. | The name | of the | limited | liability | company | is: |
|----|----------|--------|---------|-----------|---------|-----|
|----|----------|--------|---------|-----------|---------|-----|

Signature:

Printed Name: \_\_\_\_\_

| The name of the limited lia     | ibility company is:                     | · · · · · · · · · · · · · · · · · ·                        |  |  |  |
|---------------------------------|---|--|--|--|--|
|                                 | Superior Cleaning L                     | LC   |  |  |  |
| (Remember to include th         | e words "Limited Liability Company," "  | Limited Company," or the abbreviations L.L.C., LLC, or LC) |  |  |  |
| The complete street and n       | nailing addresses of the princ          | cipal office is:   |  |  |  |
| P.O. Box 2599 Idaho Falls       | i, ID. 83403                            |  |  |  |  |
| (Street Address)                |   |  |  |  |  |
| (Malling Address, if different) |   |  |  |  |  |
| The name of the registere       | d agent and street address o            | of the registered agent:                                   |  |  |  |
| Chris S. Hayes                  | 890 Oxford Drive Idaho Falls, ID. 83401 |  |  |  |  |
| (Name)                          | (Address cannot be a po                 | est office box or postal mail box)                         |  |  |  |
| The name and address of         | at least one governor of the            | limited liability company:                                 |  |  |  |
| Tony Coronado                   | P.O. Box 2599 Idaho Falls, ID. 83403    |  |  |  |  |
| (Name)                          | (Address)                               |  |  |  |  |
| (Name)                          | (Address)                               |  |  |  |  |
| ,                               | y iddison,                              |  |  |  |  |
| (Name)                          | (Address)                               |  |  |  |  |
|                                 |   |  |  |  |  |
| (Name)                          | (Address)                               |  |  |  |  |
| Mailing address for future      | correspondence (annual rep              | ort notices):  |  |  |  |
|                                 | ces 890 Oxford Drive Idah               |  |  |  |  |
| (Address)                       |   |  |  |  |  |
|                                 |   |  |  |  |  |
| ature of organizer(s)           | <i>^</i>                                | Consider of Clots are sub-                                 |  |  |  |
| ature:                          | nuna da                                 | Secretary of State use only IDAHO SECRETARY OF STATE       |  |  |  |
| autoi                           | <u> </u>                                | 09/05/2017 05:00   |  |  |  |
| ed Name: Tony Coronado          |   | CK:14583454 CT:172099 BH:1601135                           |  |  |  |
| od Raine.                       |   | 10 100.00 = 100.00 DRGAN LLC #2                            |  |  |  |

10 20.00 = 20.00 EXPEDITE C #3

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