

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

2014 APR 28 AM 11: 32

SECRETARY

±05	(Instructions of	n back of applicatior	n)	STATE OF IDAHO
. The name	e of the limited liabil	lity company is:		· <del>-</del>
SENTINE	EL PEST CONTROL LLO	3		
	plete street and mail	initial designated	office:	
(Street Addr		2, 15/11/0 00/00		
(Mailing Add	dress, if different than street a	ddress)		
. The name	e and complete stree	et address of the reg	istered agent:	
JASON (	GUADALUPE	2233 WEST PANAMA ST. BOISE IDA		DAHO
(Name)		(Street Address)	(Street Address)	
I. The name company		least one member o	·	mited liability
IASON GU	<u>Name</u> SUADALUPE	2222 WEST 1	Address EST PANAMA ST. BOISE IDAHO	
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3 Future ef	fective date of filing	(ontional):		
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Signature of	i a manager, meml	ber or authorized		
erson.		Γ	Secretary	of State use only
Signature 3	. Jason Greddyn II			
vped Name:	JASON GUADALUPE		IDAHO	SECRETARY OF STATE
, pou 1101110.	·			28/2014 05:00
Signature				T:296185 BH:1422
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