



0005250276

**STATE OF IDAHO****Office of the secretary of state, Phil McGrane  
CERTIFICATE OF ORGANIZATION LIMITED  
LIABILITY COMPANY**

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

*For Office Use Only***-FILED-**

File #: 0005250276

Date Filed: 5/24/2023 1:56:12 PM

<p>Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (see descriptions below)</p> <p>1. Limited Liability Company Name Type of Limited Liability Company Entity name</p> <p>2. The complete street address of the principal office is: Principal Office Address</p> <p>3. The mailing address of the principal office is: Mailing Address</p> <p>4. Registered Agent Name and Address Registered Agent</p>		<p>Standard (filing fee \$100)</p> <p>Limited Liability Company Northern Lawn Service LLC</p> <p>JOHN ROPER 8 DESTINY BAY RD SAGLE, ID 83860</p> <p>JOHN ROPER PO BOX 294 SAGLE, ID 83860-0294</p> <p>Registered Agent JOHN P ROPER Physical Address: JOHN OR AMY ROPER 8 DESTINY BAY RD SAGLE, ID 83860 Mailing Address: JOHN OR AMY ROPER 8 DESTINY BAY RD SAGLE, ID 83860-8774</p>				
<p><input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.</p> <p>5. Governors</p> <table border="1"> <tr> <td>Name</td> <td>Address</td> </tr> <tr> <td>John P Roper</td> <td>JOHN ROPER PO BOX 294 SAGLE, ID 83860</td> </tr> </table> <p>Signature of Organizer:</p> <p><u>John P. Roper</u></p> <p>Sign Here</p> <p>05/24/2023</p> <p>Date</p>			Name	Address	John P Roper	JOHN ROPER PO BOX 294 SAGLE, ID 83860
Name	Address					
John P Roper	JOHN ROPER PO BOX 294 SAGLE, ID 83860					