



# AMENDMENT TO CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2015 APR 15 AM 8:55

SECRETARY OF STATE  
STATE OF IDAHO

(Instructions on back of application)

1. The name of the limited liability company is:  
 \_\_\_\_\_  
 ALPHA HOME PEST CONTROL SYSTEMS LLC
2. The name of the limited liability company is amended to read:  
 \_\_\_\_\_  
 ALPHA HOME PEST CONTROL SYSTEMS LLC
3. The date the certificate of organization was originally filed : \_\_\_\_\_ 04/03/2015
4. The complete street and mailing addresses of the designated principal office is amended to:  
 \_\_\_\_\_
5. The mailing address for future correspondence (annual reports) is amended to:  
 \_\_\_\_\_
6. The name and address of the managers/members shall be amended as follows:
 

Name	Address	Add	Delete	Other
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
7. Signature of an authorized person.

Signature

MIKE HILL

Typed Name

Signature

Typed Name

Secretary of State use only

IDAHO SECRETARY OF STATE

04/15/2015 05:00

CK:9750 CT:309040 BH:1471094  
1@ 30.00 = 30.00 ORGAN AMEN #2

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