

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 10 AUG 16 PM 1: 07

| | (Instructions on bac | ck of application) STATE OF IDAHO |
|--|---|---|
| 1. | 1. The name of the limited liability company is: | |
| | BOISE'S BEST JA | ANITORIAL SERVICE LLC |
| 2. | | addresses of the initial designated/principal office: |
| | 6037 S. MOOVRID (Street Address) | IGE AVE BOISE ID 83709 |
| | (Mailing Address, if different than street address) | |
| 3. The name and complete street address of the req | | dress of the registered agent: |
| | ANEL SARIC (Name) | 9224 W BROGAN DR AP 203 (Street Address) BOISE 12 83709 |
| The name and address of at least one member or manager of the limited liability company; | | |
| | <u>Name</u> | <u>Address</u> |
| | ANEL SARIC | 9224 W BROGAN DR AF 203 |
| | | BOISE 14 83709 |
| | NEELS SARIC | 6037 S. MOONRIDGE AVE |
| | | BOISE 11 83709 |
| | | |
| 5. Mailing address for future correspondence (annual report notices): <u>6037 ら、HCON () AGE AVE BOJSE 1Δ 名3709</u> | | |
| 6. | Future effective date of filing (option | nal): |
| Sign pers | nature of a manager, member or on. | r authorized |
| 0: | ature And Sanic | Secretary of State use only |
| Typed Name: ANEL SARIC W95427 | | |
| Sign. | ature <u>Neris Saric</u> ed Name: <u>NERIS SARIC</u> | IDAHO SECRETARY OF STATE 08/16/2010 05:00 CK: 495693 CT: 172099 BH: 1234994 1 00.00 = 100.00 ORGAN LLC # 2 |

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