



**CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

FILED EFFECTIVE

11 AUG -5 AM 9:10

1. The name of the limited liability company is:

WeedBusters LLC

2. The complete street and mailing addresses of the initial designated/principal office:

20 E Court Blackfoot, ID 83221

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Cami Covington

(Name)

20 E Court Blackfoot, ID 83221

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Cami Covington

20 E Court Blackfoot, ID 83221

5. Mailing address for future correspondence (annual report notices):

20 E Court Blackfoot, ID 83221

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Cami Covington
Typed Name: Cami Covington

Secretary of State use only

Signature Ric Boyce
Typed Name: Ric Boyce

cert_org_3c Rev. 07/2010

IDaho SECRETARY OF STATE
08/05/2011 05:00
CK: 1111 CT: 261294 BH: 1285418
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