



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

09 JUN -2 AM 8:10

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

AARONS RESCUE PLUMBING LLC

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

29888 Howe RD WILDER ID 83676

(Street Address)

(Mailing Address, if different than street address)

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

AARON F DANES

(Name)

29888 Howe RD WILDER ID

(Street Address)

83676

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

Name

Address

AARON F DANES

29888 Howe RD WILDER ID

83676

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

29888 Howe RD WILDER ID 83676

6. Future effective date of filing (optional): NONE

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Aaron Danes

Typed Name: AARON F DANES

Signature

Typed Name:

IDAHO SECRETARY OF STATE  
06/02/2009 05:00  
CK: 4711 CT: 237682 DN: 1172851  
1 0 100 00 100 00

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