## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2012 MAR 12 AM 9: 43

FILED EFFECTIVE

(Instructions on back of application)

TE II	(Instructions on bac	ik of application)	SECTION
1.	The name of the limited liability co	ompany is:	SECRETARY OF STATE STATE OF IDAMO
	Ms Be	tty's Cleaning Service LL	3
2.	The complete street and mailing at 1701 Delmar Place Pocatello ID 83201	ddresses of the initial	designated office:
	(Street Address)		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Robert Poleki	1701 Delmar Place P	ocatello ID 83201
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>		<u>Address</u>
	Robert Poleki	1701 Delmar Place P	ocatello ID 83201
5.	Mailing address for future correspondent	ondence (annual repo	rt notices):
	1701 Delmar Place Pocatello ID 83201		
6.	Future effective date of filing (option	onal):	
_	nature of a manager, member o	or authorized	
•	nature Loken Fleh	-	Secretary of State use only
Тур	ed Name: <u>Robert Pol</u>	eki_	
	nature		IDAHO SECRETARY OF STATE  93/12/2012 95:99  CK: 1048 CT: 268045 BH: 1314703
Тур	ed Name:		1 0 100.00 = 100.00 ORGAN LLC # 2

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