FILED EFFECTI



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2010 ACT 31 PM 12: 20

	(Instructions on I	back of application)	OFFICE CO.
1. The nar	me of the limited liability	company is:	SECRETARY OF STATE STATE OF IDAHO
Northw	est Spa & Pool Service, LLC		
9706 N (Street Ad P.O. Bo	mplete street and mailing Determigan Dr., Hayden, ID (ddress) DX 186, Hayden, ID 83835 Address, II different than street address	83835	al designated office:
3. The nar	me and complete street	address of the register	red agent:
Ramsd	en & Lyons, LLP	700 Northwest Blvd	I., Coaur d'Alene, ID 83814
(Name)		(Street Address)	· · · · · · · · · · · · · · · · · · ·
Gavin C	Name Conner	9706 N. Ptarmigan	Address Dr., Hayden, ID 83835
P.O. Bo	address for future corres x 186, Hayden, ID 83835 affective date of filing (op		oort notices):
6. Future e	• , ,		
Signature o	of a manager, member	or authorized	
		or authorized	Secretary of State use only
Signature operson. Signature	of a manager, member		Secretary of State use only IDAHO SECRETARY OF 10/31/2014 09 CK:2329784 CT:172099

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