## **FILED EFFECTIVE**

CERTIFICATE OF ORGANIZATION	
LIMITED LIABILITY COMPANY	
(Instructions on back	of application)
1. The name of the limited liability com	SECRETARY OF STATE
HORIZON PLUMBING, LLC	IDAHO STATE OF IDAHO
2. The complete street and mailing addresses of the initial designated office:	
1022 BOOTH DRIVE, POCATELLO, ID 83201	
(Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street address of the registered agent:	
BETTY PIERCE	1022 BOOTH DRIVE, POCATELLO, ID 83201
(Name)	(Street Address)
<ol> <li>The name and address of at least one member or manager of the limited liability company:</li> </ol>	
	Address
BETTY PIERCE	1022 BOOTH DRIVE, POCATELLO, ID 83201
·····	
5 Mailing address for future correspon	dense (ennuel report notices):
5. Mailing address for future correspondence (annual report notices): 1022 BOOTH DRIVE, POCATELLO, ID 83201	
THE BOOM DRIVE, FOCATEBED, ID 63.	201
6. Future effective date of filing (option	al):
Signature of a manager, member or	authorized
person.	Secretary of State use only
Signature Delly for	
Typed Name	
	IDAHO SECRETARY OF STATE
Signature	
Typed Name:	1 P 100.00 = 100.00 ORGAN LLC N 2
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