

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2016 JUN -8 PM 3: 33 SECRETARY OF STATE STATE OF IDAHO

1. The name of the limited liability company is: DELUXE LAWN CARE LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is: 585 W RAMS HILL ST KUNA ID 83634

(Sireet Address)

## PO BOX 183 KUNA ID 83634

(Mailing Address, if different)

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

TIMOTHY A COX 585 W RAMS HILL ST KUNA ID 83634		83634		
(Name)	(Address cannot be a po	(Address cannot be a post office box or postal mail box.)		
The name and address	of at least one governor of the	limited liability co	impany:	
TIMOTHY A COX	PO Box 183	3 Kuna, ID	83634	
(Naitiu)	(Adviress)			
(Nañie)	(Address)			
(Name)	(Address)			
(Name)	(Address)			
Mailing address for futu	re correspondence (annual rep	ort notices):		
PO Box 183	Kuna ID 83634			
gnature of organizer(s).	21		and Otate use only	
gnature: Mund	11.	Sacret	ary of State use only	
		I II	DAHO SECRETARY OF STATE	
inted Name: TIMOTHY A COX		06/08/2016 05:00		

Signature:

Printed Name: ---

CK: CASH CT: 325395 BH: 1532321 10 100.00 = 100.00 ORGAN LLC #2

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