

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

12 MAR -7 AM 11:35

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Aqua Medics Pool Service, LLC

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

10992 W Box Canyon St, Star, ID 83669

(Street Address)

PO BOX 133, Star, ID 83669

(Mailing Address, if different than street address)

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

Nicholas Hynes

(Name)

10992 W Box Canyon St, Star, ID 83669

(Street Address)

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

NameAddress

Nicholas Hynes

PO BOX 133, Star, ID 83669

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

PO BOX 133, Star, ID 83669

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: Nicholas Hynes

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
 03/07/2012 05:00
 CK: 925359 CT: 172099 BH: 1313982
 1 @ 100.00 = 100.00 ORGAN LLC # 2

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