W76839



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANING 12 ANIO: 25

(Instructions on back of application SECRETARY OF STATE

1. The name of the limited liability compa	any is:
In Vision La	andscape & Maint. LLC
The complete street address, and mail principal office:	ling address if different, of the initial designated/
8 Rose Lane	e, Salmon, Idaho 83467
The name of the commercial registered address of the non-commercial registered	d agent; or the name and complete street ered agent:
National Registered Agents, Inc. 14	123 Tyrell Lane Boise, ID 83706 County of Ada
The name and address of at least one company:	member or manager of the limited liability
<u>Name</u>	Address
David Gower	8 Rose Lane, Salmon, Idaho 83467
5. Mailing address for future corresponde	
g and the factor of factor of the control of the co	nce (annual report notices): , Salmon, Idaho 83467
5. Future effective date of filing (optional):	
ignature of an organizer(s). (An organizer is a is acting in behalf of a required, and existing, initia	al member
members).	Secretary of State use only
yped Name: Karla Figueroa, Assistant Secret	tary 8
ignature	IDAHO SECRETARY OF STATE Second
yped Name:	1 e 100.00 = 100.00 ORGAN LLC