





## STATE OF IDAHO

## Office of the secretary of state, Lawerence Denney CERTIFICATE OF ORGANIZATION LIMITED LIABILITY

## COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

## -FILED-

File #: 0003950914

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Select one: Standard, Expedited or Same Day Service (see descriptions below)	Same Day Service (+\$100; filing fee \$200)	
1. Limited Liability Company Name		
Type of Limited Liability Company	Limited Liability Company	
Entity name	Carpet, Flooring Installation & More LLC	
2. The complete street address of the principal office is:		
Principal Office Address	4019 SQUALL VALLEY DR NAMPA, ID 83687	
3. The mailing address of the principal office is:		
Mailing Address	4019 SQUALL VALLEY DR NAMPA, ID 83687-9551	
4. Registered Agent Name and Address		
Registered Agent	Registered Agent	
	Jose Maximo Reyna-Briones	
	Physical Address: 4019 SQUALL VALLEY DR	
	NAMPA, ID 83687	
	Mailing Address:	
	4019 SQUALL VALLEY DR	
	NAMPA, ID 83687-9551	
☑ I affirm that the registered agent appointed has consented.	I to serve as registered agent for this entity.	
☐ I affirm that the registered agent appointed has consented     ☐     ☐ I affirm that the registered agent appointed has consented     ☐ I affirm that the registered agent appointed has consented     ☐ I affirm that the registered agent appointed has consented     ☐ I affirm that the registered agent appointed has consented     ☐ I affirm that the registered agent appointed has consented     ☐ I affirm that the registered agent appointed has consented     ☐ I affirm that the registered agent appointed has consented     ☐ I affirm that the registered agent appointed has consented     ☐ I affirm that the registered agent appointed has consented     ☐ I affirm that the registered agent appointed has consented     ☐ I affirm that the registered agent appointed has consented     ☐ I affirm that the registered agent appointed has consented     ☐ I affirm that the registered agent appointed has consented     ☐ I affirm that the registered agent appointed has consented agent agent appointed has consented agent agen	to serve as registered agent for this entity.	
	I to serve as registered agent for this entity.  Address	
5. Governors		
5. Governors  Name	Address 4019 SQUALL VALLEY DR	
5. Governors  Name  Eduardo A H Ballesteros	Address  4019 SQUALL VALLEY DR NAMPA, ID 83687  4019 SQUALL VALLEY DR	
5. Governors  Name  Eduardo A H Ballesteros  Jose Maximo Reyna-Briones	Address  4019 SQUALL VALLEY DR NAMPA, ID 83687  4019 SQUALL VALLEY DR	