

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 AUG 27 AM 11: 04

The name of the limited liability company is:		SECRETARY OF S STATE OF IDAI	TATE 10
B&L Handy	<u>man Service</u> s, LLC	·	
2. The complete street and mailing ad	Idresses of the initia	il designated/principal offic	e:
	n ST New Plymouth ID	83655	
(Street Address)		•	
(Mailing Address, if different than street address)			
3. The name and complete street add	ress of the registere	ed agent:	
Robert Wolfen	617 Colton	ST New Plymouth ID 83655	
(Name)	(Street Address)		
The name and address of at least of company:	one member or man		
Name Robert Wolfen	617 Colton	Address ST New Plymouth ID 83655	
Robert Woller	- UT COROLL	31 New Flymouth ID 00000	
			,
			<u> </u>
5. Mailing address for future correspo	ndence (annual rep	· ·	*
6. Future effective date of filing (option	nal):		# #
Signature of organizer(s). (An organizer is acting in behalf of a member or members).	a member, or is		
acting in behalf of a member of members).	۵	Secretary of State use only	
Signature Rall Walan	, K. PM		•
Typed Name: Robert Wolfen	الم مرة	INOMO GEODETANA O	F #90
Signature	Vorms/LLC forms/cert_org_lic.PMD	IDAHO SECRETARY OF A PART	· STATE 05:00 M: 1184696 RBAN LLC # P
Typed Name:	Memor		

W86506