

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.

1. The name of the limited liability company is:

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SECRETARY OF STATE STATE OF IDAHO

| | SGAT Cleaning LLC | | | |
|------------|--|--|--|--|
| | (Remember to include the | words "Limited Lizbility Company," "Limi | led Company," or the abbreviations L.L.C., LLC, or LC) | |
| 2. | The complete street and mailing addresses of the principal office is: 229 Quail Run St., Moscow, ID 83843 | | | |
| | | | | |
| | (Street Address) | | | |
| | PO Box 9882, Moscow, ID 83843-8204 | | | |
| | (Mailing Address, if different) | | | |
| 3. | The name of the registered agent and street address of the registered agent: | | | |
| | Tammy L. Postma | 229 Quail Run St., Moscow, ID 83843 | | |
| | (Name) | (Address cannot be a post office box or postal mail box) | | |
| 4. | The name and address of at least one governor of the limited liability company: | | | |
| | | Fammy L. Postma 229 Quail Run St., Moscow, ID 83843 | | |
| | (Name) | (Address) | | |
| | | | | |
| | (Name) | (Address) | | |
| | As a managed | (, 444, 446) | | |
| | | | | |
| | (Name) | (Address) | | |
| | · | · | | |
| | (Name) | (Address) | | |
| _ | Martin and description and appropriate to the second secon | | | |
| 5. | Mailing address for future correspondence (annual report notices): | | | |
| | PO Box 9882, Moscow, ID 83843-8204 | | | |
| | ingo can | | | |
| Sia | nature of organizer(s). | | | |
| _ | Y manual | 2 States [| Secretary of State use only | |
| Sig | nature: |) Algentines | | |
| Pric | nted Name: Tammy L. Postma | | | |
| | | | | |
| Signature: | | | IDAHO SECRETARY OF STATE | |
| , | | | 10/17/2017 05:00 | |
| Pri | nted Name: | | CK:14951458 CT:172099 BH:1607689 | |
| | | · | 10 100.00 = 100.00 ORGAN LLC #2 | |

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