		=CTN
CERTIFICATE OI	F ORGANIZATIO LITY COMPANY	ON FILED EFFECTIV
(Instructions on t	pack of application)	SEUNETARY OF STA
. The name of the limited liability	company is:	STATE OF IDAHO
Ace	American Handyman Service	
2. The complete street and mailing 1620 E. Sur	g addresses of the initial o mmerheights Dr., Meridian, Ida	designated/principal office: No 83646
(Street Addrese)		
(Mailing Address, if different then street addr	858)	
3. The name and complete street	address of the registered	agent
		ights Dr., Meridian, Idaho 63646
Mark Overgeard	(Street Address)	
5. Mailing address for future corre 1620 E. St	espondence (annual repo ummerheights Dr. Meridian, Id	rt notices): aho 83848
6. Future effective date of filing (o	optional):	
Signature of organizer(s). (An organizer (s). (An o	zer is a member, or is	Secretary of State use only
Signature	peard 5	
Typed Name:Mark Over	Include Section 1997	W 79509