



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 MAY 12 AM 8:45

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Lawnsapes LLC.

2. The complete street and mailing addresses of the initial designated/principal office:

1300 Addison Ave West, Twin Falls ID 83301

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Susan Stringer

(Name)

1300 Addison Ave W Twin Falls, ID 83301

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Susan Stringer

Address

2005 Bitterrot Dr Twin Falls ID 83301

5. Mailing address for future correspondence (annual report notices):

2005 Bitterrot Dr Twin Falls ID 83301

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Susan Stringer

Secretary of State use only

Signature

Typed Name: Craig Stringer

IDaho SECRETARY OF STATE
05/12/2011 05:00
CK: 7258 CT: 250724 BH: 1273344
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3