



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

**FILED EFFECTIVE**

(Instructions on back of application)

2015 JUL -1 AM 8:39

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

TPO HOME INSPECTIONS LLC.

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

4902 W. HILLSIDE AVE, BOISE, ID. 83703

(Street Address)

(Mailing Address, if different than street address)

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

JEFF PICHLIK

(Name)

4902 W. HILLSIDE AVE.

(Street Address)

BOISE, ID. 83703

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

Name	Address
<u>JEFF PICHLIK</u>	<u>4902 W. HILLSIDE AVE, BOISE, ID 83703</u>
<u>N/A</u>	<u>—</u>
<u>N/A</u>	<u>—</u>
<u>N/A</u>	<u>—</u>
<u>N/A</u>	<u>—</u>

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

4902 W. HILLSIDE AVE, BOISE, ID 83703

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

Typed Name

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

07/01/2015 05:00

CK:113 CT:311975 BH:1482218

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