



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2013 OCT 29 AM 8:53

1. The name of the limited liability company is:

MEADOWS VALLEY CLEANING SERVICE SECRETARY OF STATE
STATE OF IDAHO LLC

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

3630 HUBBARD LANE NEW MEADOWS ID 83654
(Street Address)

P.O. BOX 398 NEW MEADOWS, ID 83654
(Mailing Address, if different than street address)

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

BARBARA F. SMOLE 3630 HUBBARD LANE
(Name) (Street Address)

NEW MEADOWS ID 83654

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

Name	Address
<u>BARBARA F. SMOLE</u>	<u>3630 HUBBARD LANE</u>
_____	<u>P.O. BOX 398 NEW MEADOWS ID</u>
_____	<u>83654</u>
_____	_____
_____	_____

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

P.O. BOX 398 NEW MEADOWS ID 83654

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Barbara F. Smole
Typed Name: BARBARA F. SMOLE

Secretary of State use only

Signature _____
Typed Name: _____

IDAHO SECRETARY OF STATE
10/29/2013 05:00
CK: 604 CT: 289076 BH: 1395759
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W130556