

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

2015 JUL 23 AM 8: 10

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

The name of the limited liab Creative Handyman Services LL	, ,	STATE OF IDAHO	
The complete street and mai	=	e initial designated office:	
(Street Address)			
(Mailing Address, if different than street a	address)		
The name and complete stre	eet address of the reg	gistered agent:	
TIMOTHY J MCCARTHY	364 S 200 W	RUPERT, ID 83350	
(Name)	(Street Address)	(Street Address)	
company:  Name TIMOTHY J MCCARTHY	364 S 200 W	<u>Address</u> 364 S 200 W RUPERT, ID 83350	
		100 2101, 12 00000	
Mailing address for future co 364 S 200 W RUPERT, ID 8335	•	al report notices):	
304 5 200 W ROPERT, ID 6335			
Future effective date of filing	(optional):		
nature of a manager, mem	nber or authorized		
rson.		Secretary of State use only	
nature Timetry . M	Culty	IDAHO SECRETARY OF STA	
ped Name: TIMOTH WI MCCAR	RTHY V	07/23/2015 05:0	
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Typed Name: \_