



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 JUN -8 PM 4:00
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

SNAKE RIVER POOL & SPA OF THE TREASURE VALLEY, LLC

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

1340 S ORCHARD ST, BOISE, ID 83705

(Street Address)

(Mailing Address, if different than street address)

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

JIM PAXTON

(Name)

1340 S ORCHARD ST, BOISE, ID 83705

(Street Address)

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

Name

Address

JIM PAXTON, PRESIDENT

SNAKE RIVER POOL & SPA, INC

1340 S ORCHARD ST, BOISE, ID 83705

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

1340 S ORCHARD ST, BOISE, ID 83705

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature *Thomas G. Walker*
Typed Name: Thomas G. Walker, Counsel for Paxton

Signature _____
Typed Name: _____

Secretary of State use only

9 corporations/LLC forms/cert.org, Inc. PMD
Revised 07/2008

IDAHO SECRETARY OF STATE
06/08/2010 05:00
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