

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application)

2014 AUG 27 AM 8: 46

1. The name of the limited liability	company is:	CEMTTERVAN
Allinoi Pest control	сопрану в.	
2. The complete street and mailing 2545 E 300 N St, Anthony Id, 83445 (Street Address)		initial designated office:
(Mailing Address, if different than street addre	?ss)	
3. The name and complete street	address of the reg	istered agent:
Mitch Rowbury	4218 E 256 N Rigby Id, 83442	
(Name)	(Street Address)	
4. The name and address of at leacompany:	ast one member o	•
Mitch Rowbury	4218 E 256 N	Address Rigby id, 83442
5. Mailing address for future corre- 2545 E 300 N St, Anthony ID, 83445	•	al report notices):
6. Future effective date of filing (o	ptional):	
Signature of a manager, memberson.	r or authorized	9
Signature Lutul Ka	lul	Secretary of State use only IDAHO SECRETARY OF STATE 08/27/2014 05:00
Typed Name: Mitch Rowbury		CK:1187 CT:300526 BH:143903 16 100.00 = 100.00 DRGAN LLC
Signature		1 \ 1/11
Typed Name:	-	W141560