







## STATE OF IDAHO

## Office of the secretary of state, Lawerence Denney CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

-FILED-

File #: 0003919710

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| Certificate of Organization Limited Liability Compa<br>Select one: Standard, Expedited or Sa<br>descriptions below) | •                         | Expedited (+\$40; filing fee \$140)          |  |
|---|---------------------------|--|--|
| 1. Limited Liability Company Name   |                           |  |  |
| Type of Limited Liability Company   |                           | Limited Liability Company                    |  |
| Entity name   |                           | Impact Pest Control, LLC                     |  |
| 2. The complete street address of the principal offi  | ce is:                    |  |  |
| Principal Office Address  |                           | 255 BLUE LAKES BLVD N                        |  |
|   |                           | 572  |  |
|   |                           | TWIN FALLS, ID 83301                         |  |
| 3. The mailing address of the principal office is:  |                           |  |  |
| Mailing Address   |                           | 255 BLUE LAKES BLVD N PMB 572                |  |
|   |                           | TWIN FALLS, ID 83301-5238                    |  |
| 4. Registered Agent Name and Address  |                           |  |  |
| Registered Agent  |                           | Registered Agent                             |  |
|   |                           | Antonio Cuellar Jr                           |  |
|   |                           | Physical Address:<br>255 BLUE LAKES BLVD N   |  |
|   |                           | 572  |  |
|   |                           | TWIN FALLS, ID 83301                         |  |
|   |                           | Mailing Address:                             |  |
|   |                           | 255 BLUE LAKES BLVD N # 572                  |  |
|   |                           | TWIN FALLS, ID 83301-5238                    |  |
| I affirm that the registered agent a  | ppointed has consented to | o serve as registered agent for this entity. |  |
| 5. Governors  |                           |  |  |
| ·   |                           |  |  |
| Name  |                           | Address                                      |  |
| Name  | 255 BLUE LAKE             |  |  |
|   | 255 BLUE LAKE<br>572      |  |  |
| Name  |                           | ES BLVD N                                    |  |
| Name  | 572                       | ES BLVD N                                    |  |
| Name Tony Cuellar Jr  | 572                       | ES BLVD N                                    |  |