

FILED EFFECTIVE



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 JUN 20 AM 9:37

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

SAL'S LAWN Service LLC

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

3411 E MOON CREEK Ave Nampa ID  
(Street Address)83686  
(Mailing Address, if different than street address)

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

Salvador TORRES  
(Name)3411 E MOON CREEK Ave  
(Street Address) Nampa ID, 83686

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

Name	Address
<u>Salvador TORRES</u>	<u>3411 E MOON CREEK Ave</u>
	<u>Nampa ID,</u>

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

3411 E MOON CREEK Ave Nampa ID 83686

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature \_\_\_\_\_  
Typed Name: \_\_\_\_\_Signature Salvador TORRES  
Typed Name: Salvador TORRES

Secretary of State use only

IDAHO SECRETARY OF STATE

06/20/2014 05:00

CK:1990906 CT:172099 BH:1429979  
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