

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

08 AUG - 1 AM 8: 39

SESSETABL SE STATE
1. The name of the limited liability company is:  SECRETARY OF STATE STATE OF IDAHO
KEEP it Green lawncare and maintenake
2. The complete street and mailing addresses of the initial designated/principal office:
(Street Address) (Street Address)
(chaet unitas)
(Mailing Address, if different than street address)
3. The name and complete street address of the registered agent:
Charles DeCorte 1230 N. Cabrillo Kuna Id 83634 (Name) (Street Address)
4. The name and address of at least one member or manager of the limited liability company:
Name Address
Charles Decarte 1230 N. Cabrillo Kong Id 83634
5. Mailing address for future correspondence (annual report notices):
1230 N. Cabrillo Kuna Id 83634
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).  Secretary of State use only
Signature Signature
Typed Name:
Signature IDAHO SECRETARY OF STATE
Signature IDAHO SECRETARY OF STATE
Typed Name:
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