



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 OCT 22 AM 10:00

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

LK Lawn LLC

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

7449 N Carrington LN Coeur d Alene, Idaho 83815

(Street Address)

Jared Lynn P.O. Box 2726 Hayden, Idaho 83835

(Mailing Address, if different than street address)

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

Jared Lynn

(Name)

7449 N Carrington LN Coeur d Alene, Idaho 83815

(Street Address)

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

**Name**

**Address**

Jared Lynn

7449 N Carrington LN Coeur d Alene, Idaho 83815

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

Jared Lynn P.O. Box 2726 Hayden, Idaho 83835

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name:

Jared Lynn

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE  
10/22/2012 05:00  
CK: 2992 CT: 275493 BH: 1344617  
1 P 100.00 = 100.00 ORGAN LLC # 2

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