

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2013 JUL 29 AM 10: 32

(Instructions on back of application)

The name of the limited I Northern States Plumbing LL	oility company is: SECRE STATE OF IDAHC	TATE
The complete street and r 2894 W. Masters Dr. Coeur	ailing addresses of the initial designated office:	<u> </u>
(Street Address)		_
(Mailing Address, if different than str	address)	
3. The name and complete s	eet address of the registered agent:	
Justin L. Garza	2894 W. Masters Dr. Coeur d' Alene Id. 83815	
(Name)	(Street Address)	
The name and address of company:	t least one member or manager of the limited liability	
<u>Name</u>	Address	
Justin L. Garza	2894 W. Masters Dr. Coeur d' alene ld. 83815	
		-
5. Mailing address for future 2894 W. Masters Dr. Coeur d	errespondence (annual report notices): lene ld. 82815	_
6. Future effective date of fili	(optional):	-
Signature of a manager, me person. Signature	Secretary of State use only	-
Typed Name: Justin L. Garza		
Signature	IDAHO SECRETARY OF STAT	TE - GC
Typed Name:		383898 383898

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