



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 MAR 27 PM 3:20

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

G6 Lawn Care, LLC

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

4737 North Nystrom Place, Boise, ID 83713

(Street Address)

(Mailing Address, if different than street address)

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

Jackson D. Gray, P.E.

(Name)

4737 North Nystrom Place, Boise, ID 83713

(Street Address)

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

Name

Address

Jackson D. Gray, P.E.

4737 North Nystrom Place, Boise, ID 83713

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

4737 North Nystrom Place, Boise, ID 83713

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: Jackson D. Gray, P.E.

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
03/27/2014 05:00
CK: 517 CT: 294917 BH: 1417431
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W 135981