



0005077225

**STATE OF IDAHO****Office of the secretary of state, Phil McGrane
CERTIFICATE OF ORGANIZATION LIMITED
LIABILITY COMPANY**

Idaho Secretary of State
PO Box 83720
Boise, ID 83720-0080
(208) 334-2301
Filing Fee: \$100.00

*For Office Use Only***-FILED-**

File #: 0005077225

Date Filed: 1/21/2023 12:26:59 PM

<p>Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (see descriptions below)</p> <p>1. Limited Liability Company Name Type of Limited Liability Company Entity name</p> <p>2. The complete street address of the principal office is: Principal Office Address</p> <p>3. The mailing address of the principal office is: Mailing Address</p> <p>4. Registered Agent Name and Address Registered Agent</p>		<p>Standard (filing fee \$100)</p> <p>Limited Liability Company Zen Pest Services LLC</p> <p>28938 ROCKY RD PARMA, ID 83660</p> <p>28938 ROCKY RD PARMA, ID 83660-6456</p> <p>Registered Agent Eva Sharp Physical Address: 28938 ROCKY RD PARMA, ID 83660 Mailing Address: 28938 ROCKY RD PARMA, ID 83660-6456</p>						
<p><input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.</p> <p>5. Governors</p> <table border="1"> <tr> <td>Name</td> <td>Address</td> </tr> <tr> <td>Travis Capistran</td> <td>28938 ROCKY RD PARMA, ID 83660-6456</td> </tr> <tr> <td>Jordon Sharp</td> <td>28938 ROCKY RD PARMA, ID 83660-6456</td> </tr> </table> <p>Signature of Organizer:</p> <p><i>Jordon Sharp</i></p> <p>Sign Here</p> <p>01/21/2023</p> <p>Date</p>			Name	Address	Travis Capistran	28938 ROCKY RD PARMA, ID 83660-6456	Jordon Sharp	28938 ROCKY RD PARMA, ID 83660-6456
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Travis Capistran	28938 ROCKY RD PARMA, ID 83660-6456							
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