

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE

(Instructions on back of application)

09 NOV 10 AM 8: 12

. The name of the limited liability company	SIAIE UT IDATIO
Spruce Tre	ee Service LLC
	es of the initial designated/principal office:
(Street Address)	
(Mailing Address, if different than street address)	
The name and complete street address o	of the registered agent:
Sharolyn Spruce	1355 W. 3rd Street, Weiser, ID 83672
(Name) (Stre	eet Address)
The name and address of at least one me company:	
Name	Address
Sharolyn Spruce	1355 W. 3rd Street, Weiser, ID 83672
	The second secon
Mailing address for future correspondence	
1355 W. 3rd Str	reet, Weiser, ID 83672
and the second s	
. Future effective date of filing (optional): _	
gnature of organizer(s) (An organizer is a mem ting in behalf of a member or members).	nper, or is
any in penaltor a memberosamembers.	Secretary of State use only
gnature	U 88 20 2  U 98 20 2  U 19840 SECRETARY OF STATE  11/10/2009 05:0  CK: 6886 CT: 242145 Mt. 1194
ped Name: Sharolyn Spruce	F
	m 88 30 5
gnature	No. 10 10 10 10 10 10 10 10 10 10 10 10 10
yped Name:	IDAHO SECRETARY OF STATE
	11/10/2009 U5: K