

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE 2015 APR 17 PM 3: 02

SECRETARY

(Instructions on back of application)

	STATE OF IDAHO
1. The name of the limited liability company is:	WE OF IDAHÔ
ARBOR-SAFE Professional tr	ee management the
2. The complete street and mailing addresses of the	initial designated office:
(Street Address)	Pa (D 83687
(Mailing Address, if different than street address)	
3. The name and complete street address of the regi	stered agent:
(Name) Une Salve Kei 15/1 (Street Address)	E nottingham in Nampa ID B3682
4. The name and address of at least one member or company:	manager of the limited liability
Name	Address
John Duesolekes 75/1 6	- nottingham in
John Occesoliekes 7511 & James 19than 7511	E Nottingham In
	il
	į.
5. Mailing address for future correspondence (annual	report notices):
7511 E nottingham in Nam	Pa 1D 83687
~	
6. Future effective date of filing (optional):	
Signature of a manager, member or authorized	
person.	Secretary of State use only
Signature I live	
Typed Name:) anes /o than	IDAHO SECRETARY OF STATE
	04/17/2015 05:00 CK:2761518 CT:172099 BH:14715
Signature W DWarlet	1@ 100.00 = 100.00 ORGAN LLC
Typed Name: 3 1, 2 Diestiebe	1@ 20.00 = 20.00 EXPEDITE C #

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