

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 FEB -5 AM 8: 26

•	SECRETARY OF STATE
1. The name of the limited liability co	
Palouse	e Valley Septic Service LLC
2. The complete street and mailing ac	ddresses of the initial designated/principal office:
235 Cedar	r Street, Potlatch, Idaho 83855
(Street Address) PO Box	367, Potlatch, Idaho 83855
(Mailing Address, if different than street address)	
3. The name and complete street add	Iress of the registered agent:
Tyson Brent Koehn	235 Cedar Street, Potlatch, Idaho 83855
(Name)	(Street Address)
The name and address of at least of company: Name	one member or manager of the limited liability Address
Tyson Brent Koehn	235 Cedar Street, Potlatch, Idaho 83855
5. Mailing address for future correspo	
PO Box	c 367, Potlatch, Idaho 83855
6. Future effective date of filing (optio	onal);
Signature of organizer(s). (An organizer is	a member, or is
acting in behalf of a member or members).	Secretary of State use only
Signature ###	y/Agent
Typed Name: John H. Norton, Attorney	y/Agent g
	98.
Signature	Total
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