

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY JUN 13 44 9: 30

(Instructions on back of applications)	on)
1 The name of the limited liability company is:	SECHETARY OF STATE
1. The name of the limited liability company is: 1. Time Pest Control, LL	STALE OF IDAHO
2. The complete street and mailing addresses of the	he initial designated office:
25579 Par Dr. Caldwe	U, ID 83607
(Street Address) SAME 25579 Pay Dr. (aldwell T) 82607
(Mailing Address, if different than street address)	W4WES/-40 V3 WV!
3. The name and complete street address of the re	egistered agent:
11 1 1 2	
Chad L. Royce 25579 (Name) (Street Address	Par Dr. Caldwell, ID 88607
(Sheet Address	55)
4. The name and address of at least one member	or manager of the limited liability
company:	or manager or the inflitted hability
Name	Address
Chad L. Royce 25579	Par Dr. Caldwell. ID 83607
	
5. Mailing address for future correspondence (ann	ual report notices):
25579 Par Dr. Caldwell, ID	
E TITOL PI CALLER, LO	V) 60 /
6. Future effective date of filing (optional):	
Signature of a manager, member or authorized	
person.	
Simpature Communication of the	Secretary of State use only
Signature	IDAHO SECRETARY OF STATE
Typed Name: Chad Royce	06/13/2014 05:00 CK:207 CT:297930 BH:1429053
•	1@ 100.00 = 100.00 DRGAN LLC #
Signature	i i
Typed Name:	1.100000

W138997

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