

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 JUN 14 AM 8: 50

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1. The name of the limited liability	company is:	SECRETARY OF S STATE OF IDA	10 10
Yard Guard, LLC		On the second	
2. The complete street and mailing 3360 West 3180 North, Moore, Idaho		initial designated office:	_
(Street Address)			
PO Box 434, Moore, Idaho 83255			
(Mailing Address, if different than street address	SS)		
The name and complete street a	iddress of the regi	stered agent:	
Chris S Hayes	890 Oxford Dri	ve, Idaho Falls, Idaho 83401	
(Name)	(Street Address)		
4. The name and address of at least	st one member or	manager of the limited liability	
company:			
Name	DO 5 404 5	Address	
Brad J Gamett	PO Box 434, N	loore, Idaho 83255	_
			-
			_
			_
			_
Mailing address for future corres	pondence (annua	l report notices):	
c/o Hayes Management Services, in	c. 890 Oxford Dri	ve, Idaho Falls 83401	
6. Future effective date of filing (op	tional):		
o. Future enective date or ming (op	idolial).		-
Signature of a manager, member	or authorized		
person.	Piller		
		Secretary of State use only	
Signature Sacolo Ma	Her	IDAHO SECRETARY OF ST	i me
Typed Name: Brad J Gamett		06/11/2015 05:	
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Signature		_ w w w w w w	

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Typed Name: