



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

11 FEB 14 AM 8:35

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

IDAHO EXTREME TREE SERVICE, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

306 E. PINE STREET, CASCADE, ID 83611

(Street Address)

P.O. BOX 1147, CASCADE, ID 83611

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

JAMES W. KUNSKY, JR.

(Name)

306 E. PINE STREET, CASCADE, ID 83611

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

JAMES W. KUNSKY, JR.

Address

P.O. BOX 1147 CASCADE, ID 83611

JACOB F. KUNSKY

2081 SW BUCKEY DR. MOUTAIN HOME, ID 83647

5. Mailing address for future correspondence (annual report notices):

P.O. BOX 1147, CASCADE, ID 83611

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature James W. Kunsky
Typed Name: JAMES W. KUNSKY

Signature J. ZK
Typed Name: JACOB F. KUNSKY

Secretary of State use only

IDAHO SECRETARY OF STATE
02/14/2011 05:00
CK: 685888 CT: 172999 BH: 1259654
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