



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2010 APR -1 AM 11:06

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

ALL 4 SERVICE, LLC

2. The complete street address, and mailing address if different, of the initial designated/ principal office:

855 Madrona St. North, Twin Falls, Idaho 83301

3. The name of the commercial registered agent; or the name and complete street address of the non-commercial registered agent:

Melisa A. Robinson 644 Monte Vista Drive, Twin Falls, Idaho 83301

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

Name

Address

Rochelle Dean Larson

855 Madrona St. North, Twin Falls, Idaho 83301

Layton Ryan Larson

855 Madrona St. North, Twin Falls, Idaho 83301

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

855 Madrona St. North, Twin Falls, Idaho 83301

6. Future effective date of filing (optional):

Signature of an organizer(s). (An organizer is a member, or is acting in behalf of a required, and existing, initial member or members).

Signature _____

Typed Name: Karla Figueroa, Legalzoom.com, Inc.

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
04/01/2010 05:00
CK: 431261 CT: 167623 BN: 1215746
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W92060