

## CERTIFICATE OF ORGANIZATIONFILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 JAN -6 PM 2:21

1. The name of the limited liability company is:  SECRETARY OF STATE STATE OF IDAHO  2. The complete street and mailing addresses of the initial designated/principal office:
-Kelly Lopez Construction LLC
2. The complete street and mailing addresses of the initial designated/principal office:
4423 E. Locust Lane Nampa Idaho 83686 (Street Address)
(Mailing Address, if different than street address)
3. The name and complete street address of the registered agent:
P. Ktlly lopez 4423 E. Locust Lane Nampa, ID (Street Address) 8368
4. The name and address of at least one member or manager of the limited liability company:
P. Kelly lopez 4423 E-Locust Ln. Nampa, ID 83680
5. Mailing address for future correspondence (annual report notices):  4423 E. Locust Ln. Nampa ID 83686
6. Future effective date of filing (optional):
Signature of organizer(s). (An organizer is a member, or is cting in behalf of a member or members).
Signature P. Kelly Lopez  Signature I I I I I I I I I I I I I I I I I I I
12000 12000
Signature IDAHO SECRETARY OF STATE
yped Name: 91/86/2019 95:00

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