



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

12 FEB 21 PM 1:58

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Anderson Plumbing, LLC

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

5589 S. Jonquil Place, Boise, ID 83716

(Street Address)

PO Box 170248, Boise, ID 83717

(Mailing Address, if different than street address)

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

Kenneth R. Anderson

(Name)

5589 S. Jonquil Place, Boise, ID 83716

(Street Address)

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

Name

Address

Michele Anderson

5589 S. Jonquil Place, Boise, ID 83716

Kenneth R. Anderson

5589 S. Jonquil Place, Boise 83716

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

PO Box 170248, Boise, ID 83617

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Kenneth R. Anderson

Signature

Typed Name: Michele Anderson

Secretary of State use only

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02/21/2012 05:00
CK: 909664 CT: 172099 BH: 1311467
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