

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

09 SEP 30 AM 8: 35

(Instructions on back of application)

SECRETARY OF STATE

1. The name of the limited liability company is:
"MENO'S LAWN CARE & SNOW KENOVAL
2. The complete street and mailing addresses of the initial designated/principal office:
122 E 450 N SHOSHONE 10 83352 (Street Address)
(Mailing Address, if different than street address)
The name and complete street address of the registered agent:
(Street Address) 150 N SHOSHONE
4. The name and address of at least one member or manager of the limited liability company:
Name Address
Some ABOVE SOME ABOVE
5. Mailing address for future correspondence (annual report notices):
SALE ABOVE
6. Future effective date of filing (optional):
Signature of organizer(s). (An organizer is a member, or is
acting in behalf of a member or members). Secretary of State use only
Signature
Typed Name: WILLERNO CORNO &
/ Skory
Signature Signature Signature 10000 Signature 100000 10000 10000 10000 10000 10000 10000 10000 10000 100000 10000 10000 10000 10000 10000 10000 10000 10000 100000 100000 10000 10000 10000 10000 10000 10000 10000 100
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