



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

10 FEB -4 AM 8:30

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

A Lawns Best Friend LLC

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

12697 Desert Lodge Trail, Nampa, Idaho 83686

(Street Address)

(Mailing Address, if different than street address)

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

Renee L. Paffumi

(Name)

12697 Desert Lodge Trail, Nampa, ID 83686

(Street Address)

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

**Name**

**Address**

Renee L. Paffumi

12697 Desert Lodge Trail, Nampa, ID 83686

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

12697 Desert Lodge Trail, Nampa, ID 83686

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).

Signature

Typed Name: Renee L. Paffumi

Signature

Typed Name:

Secretary of State use only

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Revised 07/2006

IDAHO SECRETARY OF STATE  
02/04/2010 05:00  
CK: 4130 CT: 134899 BH: 1206687  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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