

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

2014 DEC 18	AM	P. a.
SECRETARY STATE OF	);;s	o. 31 Tate

OF E	(Instructions on back	of application	)	SECRETARY OF 31	
1.	The name of the limited liability cor	mpany is:		SECRETARY OF STATE	
	North Fork Cleaning LLC.				
2.	The complete street and mailing ad	dresses of the	initial designated	office:	
	4190 N Big Springs Loop Island	Park ID 83	429		
	(Street Address) P.O Box 403 Island Park I	D 93420			
	(Mailing Address, if different than street address)	D 03429			
3.	The name and complete street address of the registered agent:				
	Trista Dexter	4190 N Big Sp	orings Loop		
	(Name)	(Street Address)			
4.	The name and address of at least of company:  Name		Address	mited liability	
	Robert Jay Dexter	4190 N Big Springs Loop		U	
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_	MARINE A Adams of Colors		-!		
ອ.	Mailing address for future correspondence PO BOX 403 Island Park	•	ai report notices):	Į	
	TO DON TOO ISTANG PAIR	10 03423			
6.	Future effective date of filing (option	nal):			
	3 (1)	,			
Sig	nature of a marjager, member or	r authorized			
	son.	r <sup>r</sup>	Constant	of State use only	
Oi~	notice history	1	_	SECRETARY OF STATE	
Signature Alster Alexter				8/2014 05:00	
ιyţ	ped Name: <u>Irista Dext</u>	res	CK: 1094 C	T:304276 BH:1453532	
Sin	naturo		1@ 100.00 =	= 100.00 ORGAN LLC #	
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