

FILED EFFECTIVE

# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 MAR 21 AM 11:02

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Restoration Pro Valley County LLC

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

13009 Leland Dr Donnelly, ID 83615

(Street Address)

PO Box 867 Donnelly, ID 83615

(Mailing Address, if different than street address)

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

Beau Value

(Name)

13009 Leland Dr Donnelly, ID 83615

(Street Address)

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

**Name****Address**

Beau Value

13009 Leland Dr Donnelly, ID 83615

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

PO Box 867 Donnelly, ID 83615

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature 

Typed Name: Beau Value

Signature

Typed Name:

Secretary of State use only

 IDAHO SECRETARY OF STATE  
 03/21/2011 05:00  
 CK: 633197 CT: 172099 BH: 1265166  
 1 @ 100.00 = 100.00 ORGAN LLC # 2

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