

CERTIFICATE OF ORGANIZATION ED EFFECTIVE

(Instructions on back of application)

1.	The name of the limited liability company is:	2015 AUG 20 AM 8: 44
	DEADWOOD TREE AND BRUSH REMO	A
2.	The name of the limited liability company is amended to read: ———————————————————————————————————	
3.	The date the certificate of organization was originally filed: 06/24/2015	
4.	The complete street and mailing addresses of the designa amended to:	ted principal office is
	408 N 5th St, Bellevue, Idaho 833	13
5.	The mailing address for future correspondence (annual reports) is amended to: P.O. Box 2886 1+ailey, TD 83333	
6.	The name and address of the managers/members shall be Name Address Aaron James Arnaiz 408 N 5th St, Bellevue, Idaho 83313 Adrienne Moore 408 N 5th St, Bellevue, Idaho 83313	amended as follows: Add Delete Other Address Change Address Change
7. Signa	Signature of an authorized person. Miscenae Marke	
	Adrienne Moore d Name	Secretary of State use only
Signa	nture	
	Aaron James Arnaiz	IDAHO SECRETARY OF STATE 08/20/2015 05:00 169 CT:313662 BH:1488879

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16 30.00 = 30.00 ORGAN AMEN #2