



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2015 FEB 17 AM 9:32

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Davis Repair LLC

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

160 South 1st West, Soda Springs, ID 83276

(Street Address)

Same

(Mailing Address, if different than street address)

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

Tracy Davis

(Name)

390 Gagon Drive, Soda Springs, ID 83276

(Street Address)

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

Name

Address

Tracy Davis

390 Gagon Drive, Soda Springs, ID 83276

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

390 Gagon Drive, Soda Springs, ID 83276

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Tracy Davis

Typed Name: Tracy Davis

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

02/17/2015 05:00

CK:3858 CT:95409 BH:1462118

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