



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2013 JUN 20 PM 1:42

The name of the limited liability company is:

SECRETARY OF STATE
STATE OF IDAHO

Snake River Collision and Towing LLC

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

243 Gladstone Idaho Falls ID 83401

(Street Address)

(Mailing Address, if different than street address)

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

Zake M.A. Elabed
(Name)
Zake Elabed

7210 E. CLIFFSIDE LN
(Street Address)
IDAHO FALLS ID 83406

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

Name	Address
<u>Zake MA Elabed</u>	<u>7210 E. CLIFFSIDE LN</u>
	<u>IDAHO FALLS ID 83406</u>

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

1480 N. WOODWIFF Ave Idaho Falls ID 83401

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Zake M.A. Elabed
Typed Name: Zake MA Elabed

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
06/20/2013 05:00
CK: 1447149 CT: 172899 BH: 1378946
1 @ 100.00 = 100.00 ORGAN LLC # 2

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