







LIABILITY COMPANY

For Office Use Only

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File #: 0005507006

12/10/2023

Date

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1. Limited Liability Company Name Type of Limited Liability Company Entity name 2. The complete street address of the principal office is: Principal Office Address 3. The mailling address of the principal office is: Mailling Address 4. Registered Agent Name and Address Registered Agent Name and Address Registered Agent Name and Address A But a filirm that the registered agent appointed has consented to serve as registered agent for this entity. 5. Governors Name Name Address Limited Liability Company Limited Liability Lich Lich Lich Limited Liability Lich Lich Lich Lich Lich Lich Lich Lich	Certificate of Organization Limited Liab Select one: Standard, Exped descriptions below)	ited or Same Day Service (see	Standard (filing fee \$100)
Entity name ### Hot Rod Specialties LLC 2. The complete street address of the principal office is: Principal Office Address JOEL RODE 345 WEST STRIPED OWL STREET KUNA, ID 83634 3. The mailing address of the principal office is: Mailing Address JOEL RODE 345 W STRIPED OWL STREET KUNA, ID 83634-1684 4. Registered Agent Name and Address Registered Agent Agent JOEL C RODE Physical Address: 345 WEST STRIPED OWL STREET KUNA, ID 83634 Mailing Address: JOEL C RODE 345 W STRIPED OWL STREET KUNA, ID 83634 Mailing Address: JOEL C RODE 345 W STRIPED OWL STREET KUNA, ID 83634-1684 I affirm that the registered agent appointed has consented to serve as registered agent for this entity. 5. Governors Name			
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JOEL C RODE 345 WEST STRIPED OWL STREET	5. Governors		
	Name		Address
	JOEL C RODE		WL STREET

JOEL CHRISTOFFER RODE

Sign Here