



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 SEP -2 AM 8:42

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Trail Creek Repair, LLC

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

295 South Agate - Victor, Idaho 83455
(Street Address)

P.O. Box 316 - Victor, Idaho 83455
(Mailing Address, if different than street address)

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

Allen Moore
(Name)

4899 Country Club Dr - Victor, ID
(Street Address) 83455

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

Name	Address
<u>Allen Moore</u>	<u>4899 Country Club Dr. Victor, ID 83455</u>
<u>Sally Moore</u>	<u>4899 Country Club Dr. Victor, ID 83455</u>
_____	_____
_____	_____
_____	_____

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

P.O. Box 316 Victor ID 83455

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Allen Moore

Signature _____

Typed Name: Sally Moore

Secretary of State use only

IDAHO SECRETARY OF STATE
09/02/2010 05:00
CK: 4310 CT: 250914 BH: 1237340
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

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