

Signature \_\_\_\_\_ Typed Name:

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE
09 JAN 29 AM 10: 27

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

. The name of the limited liability con	mpany is: STATE OF IDAHO
Bring I	It Back Restoration, LLC
. The complete street address, and me principal office:	nailing address if different, of the initial designated/
6124 Casti	le Drive, Boise, Idaho 83703
<ol> <li>The name of the commercial register address of the non-commercial register</li> </ol>	ered agent; or the name and complete street istered agent:
Lyle Huffaker 61	124 Castle Drive, Boise, Idaho 83703
<ol> <li>The name and address of at least of company:</li> <li>Name</li> </ol>	one member or manager of the limited liability
Lyle Huffaker	6124 Castle Drive, Boise, Idaho 83703
5. Mailing address for future correspo	ondence (annual report notices): astle Drive, Boise, Idaho 83703
6. Future effective date of filing (optio	· ·
S <b>ignature of an organizer(s)</b> . (An organiz or is acting in behalf of a required, and existing	a, initial member
or members).	Secretary of State use only
y A	om.com, Inc.
Signature	
Typed Name: Karmelia Fredrick, Legalzoo	OM.COM, INC.

IDAHO SECRETARY OF STATE
01/29/2009 05:00
CK: 388865 CT: 167623 BH: 1154559
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