



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
2013 MAY -1 AM 8:58

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

BOISE COUNTY AUTO & REPAIR LLC

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

26 Maria

(Street Address)

Horseshoe Bend, Idaho 83629

(Mailing Address, if different than street address)

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

Robert Greiner

(Name)

26 Maria Horseshoe Bend, Idaho 83629

(Street Address)

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

Name

Address

Robert Greiner

26 Maria Horseshoe Bend, Idaho 83629

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

26 Maria Horseshoe Bend, Idaho 83629

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Robert Greiner

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
05/01/2013 05:00
CK: 1608 CT: 271954 BH: 1371969
1 @ 100.00 = 100.00 ORGAN LLC # 2

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