



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 APR 26 AM 8:12

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Davis Home & RV Repair LLC

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

2456 E 300 N Saint Anthony, ID 83445

(Street Address)

N/A

(Mailing Address, if different than street address)

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

Susan Davis

(Name)

2456 E 300 N Saint Anthony, ID 83445

(Street Address)

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

Name

Timothy L Davis

Address

2456 E 300 N Saint Anthony, ID 83445

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

2456 E 300 N Saint Anthony, ID 83445

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Timothy L Davis

Secretary of State use only

Signature

Typed Name:

W102032