

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2012 OCT 31 AM 9: 02

(Instructions on back of application)

-	(moductions on back	or application)	Mark the state of
1.	The name of the limited liability cor	npany is:	SECTION OF STATE STATE OF IDAHO
	Barragan Auto & Truck Repair, LLC		
2.	The complete street and mailing ad 263 Clear Lakes Rd., Buhl, ID 83316	dresses of the initial desi	gnated office:
	(Street Address)	· · · · · · · · · · · · · · · · · · ·	
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
Ο.	The hame and complete street address of the registered agent.		
	Anibal Barragan	263 Clear Lakes Rd., Buhl,	ID 83316
	(Name)	(Street Address)	
	•		
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>	Ad	dress
	Anibal Barragan	263 Clear Lakes Rd., Buhi	, ID 83316
		- M3-1	
5.	Mailing address for future correspon	ndence (annual report no	tices):
	263 Clear Lakes Rd., Buhl, ID 83316		
6.	Future effective date of filing (option	nal):	
_	nature of a manager, member or son.	authorized	
1			Secretary of State use only
Sig	nature Mal		
	ed Name: Anibal Barragan		
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IDAHO SECRETARY OF STATE
10/31/2012 05:00
CK: 8341 CT: 142512 BH: 1345888
1 0 180.80 = 100.00 ORGAN LLC # 2

Signature

Typed Name: