



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 APR -6 AM 9: 59

1. The name of the limited liability company is:

Trinity Mobile Custom Welding and Repair "L.L.C."

SECRETARY OF STATE
STATE OF IDAHO

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

484 11th Street

(Street Address)

484 11th Street Idaho Falls Idaho 83404

(Mailing Address, if different than street address)

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

Michael Shackelford

(Name)

484 11th Street

(Street Address)

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

Name

Address

Michael Shackelford

484 11th Street Idaho Falls Idaho 83404

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

484 11th Street Idaho Falls Idaho 83404

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

Signature of a manager, member or authorized person.

Signature Michael Shackelford

Typed Name: Michael Shackelford

Signature Michael Shackelford

Typed Name: Michael Shackelford

Secretary of State use only

IDAHO SECRETARY OF STATE

04/06/2015 05:00

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