

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 DEC 29 PM 2: 03

The name of the limited liability comp  Record  R	oany is: OMTRANS LLC	SECRETARY OF STATE STATE OF IDAHO
2. The complete street and mailing addr		, ,
(Street Address)	erline Rd, Nampa Id	83080
<u> </u>		
(Mailing Address, if different than street address)		
3. The name and complete street address	ss of the register	ed agent:
Sorin Pica	1140 So Po	werline Rd, Nampa Id 83686
(Name)	(Street Address)	
The name and address of at least one company:	e member or mai	nager of the limited liability
Name	Address	
Sorin Pica	1140 So Po	werline Rd, Nampa Id 83686
		manufacture and the second
5. Mailing address for future correspond	ence (annual rep erline Rd, Nampa Id	
6. Future effective date of filing (optional	):	
Signature of organizer(s). (An organizer is a m	nember, or is	
acting in behalf of a member or members).	F	Secretary of State use only
Simple Control of the	Q.	Secietary of State use Grily
Signature Sorin Pica	ong Rc PMD	
Typed Name: Sorin Pica		IDONG SECRETORY OF STATE
Signature	Morms\LLC forms\cert	12/29/2008 05:00 CK: 183215 CT: 172899 BN: 1149966
Typed Name: ALINA PICA	Morms	vodebb (Nither ITE 4 5