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	ARTICLES OF ORC		2005 APR 21 AM 9: 11
12.01	(Instructions on back o	of application)	SIAILOFILE
1. The na	ame of the limited liability compa	any is:	ioniH0
Visio	ns Auto Restorations, L.L.C.		
2. The st	reet address of the initial registe	ered office is:	
1827	4 S. Francis Faire Rd., Worley,	, Idaho, 83876	
	e name of the initial registered a ley A. Leinen	igent at the above add	ress is:
3. The m	ailing address for future corresp	ondence is:	
1827	4 S. Francis Faire Rd., Worley,	Idaho, 83876	
4. Manag	gement of the limited liability con	npany will be vested in:	
•	ger(s) or Member(s)	(please check the approprial	
5. If man	agement is to be vested in one o ss(es) of at least one initial mans er(s), list the name(s) and addre	ager. If management is	to be vested in the
5. If man	agement is to be vested in one o ss(es) of at least one initial mans er(s), list the name(s) and addre Name	ager. If management is	to be vested in the
5. If man addres memb	ss(es) of at least one initial mana er(s), list the name(s) and addre	ager. If management is ess(es) of at least one l	s to be vested in the nitial memb er .
5. If man addres memb	es(es) of at least one initial mana er(s), list the name(s) and addre	ager. If management is ess(es) of at least one l	s to be vested in the nitial member.
5. If man address member 5. Stant	er(s), list the name(s) and addre Name ley A. Leinen ure of at least one person respon	ager. If management is iss(es) of at least one li 18274 S. Francis Fair	to be vested in the nitial member. Address re Rd., Worley, ID 83876
5. If man address member 5. Standard 6. Signatu	er(s), list the name(s) and addre Name ley A. Leinen ure of at least one person response.	ager. If management is iss(es) of at least one li 18274 S. Francis Fair	to be vested in the nitial member. Address re Rd., Worley, ID 83876
5. If man address member 5. Stanton 6. Signatu Typed N	er(s), list the name(s) and addre Name ley A. Leinen ure of at least one person respon	ager. If management is iss(es) of at least one lines (es) of at least one l	is to be vested in the nitial member. Address re Rd., Worley, ID 83876 mited liability company:
5. If man address member 5. Stanton Signatu Typed N Capacit	ure of at least one initial mana ley A. Leinen Ley A. Leinen Ley A. Leinen Ley A. Leinen Ley B. Leinen Ley B. Leinen Ley B. Leinen Ley B. Leinen	nsible for forming the literature.	is to be vested in the nitial member. Address re Rd., Worley, ID 83876 mited liability company:
5. If man address member Stand Signatu Typed Nan Capacit	ss(es) of at least one initial mana er(s), list the name(s) and address Name ley A. Leinen ure of at least one person response. Stanley A. Leinen	18274 S. Francis Fair	is to be vested in the nitial member. Address re Rd., Worley, ID 83876 mited liability company:

IDAHO SECRETARY OF STATE

94/21/2005 95:00

CK: 4605 CT: 45002 BH: 805975

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