



**CERTIFICATE OF ORGANIZATION  
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

**FILED**

10 MAY 21 AM 11:15

SECRETARY OF STATE  
STATE OF IDAHO

- 1. The name of the limited liability company is:**

C.B. Midnight Auto L.L.C.

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

**570 HWY 34 Grace, Idaho 83241**

**(Street Address)**

(Mailing Address, if different than street address)

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

**Cody L. Bredehoft**

**570 HWY 34 Grace, Idaho 83241**

(Name)

**(Street Address)**

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

**Name****Address**

**Cody L. Bredehoft**

570 HWY 34 Grace, Idaho 83241

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

**570 HWY 34 Grace, Idaho 83241**

6. Future effective date of filing (optional): 6-10-2010

**Signature of organizer(s).** (An organizer is a member, or is acting in behalf of a member or members).

Signature Cody L. Bredehoff  
Typed Name: Cody L. Bredehoff

Signature \_\_\_\_\_  
Typed Name: \_\_\_\_\_

**Secretary of State use only**

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Revised 07/2008

IDAHO SECRETARY OF STATE  
 05/21/2010 05:00  
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