



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 FEB 17 PM 4:23

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

ENTRE AUTO REPAIR LLC

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

1903 HERVEY STREET, BOISE ID 83705  
(Street Address)

(Mailing Address, if different than street address)

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

DAVID V EASTMAN  
(Name)

1903 HERVEY STREET  
(Street Address)

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

<u>Name</u>	<u>Address</u>
<u>DAVID V EASTMAN</u>	<u>1903 HERVEY STREET, BOISE ID. 83705</u>
_____	_____
_____	_____
_____	_____
_____	_____

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

SAME AS ABOVE

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature David V Eastman  
Typed Name: DAVID V EASTMAN

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

Secretary of State use only

IDAHO SECRETARY OF STATE  
02/17/2012 05:00  
CK: 900423 CT: 172099 BH: 1311257  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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