



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 FEB 16 PM 1:28

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

NORTHWEST AUTO REPAIR LLC

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

11650 FAIRVIEW AVE BOISE, IDAHO 83713

(Street Address)

(Mailing Address, if different than street address)

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

RICK ANDERSON

(Name)

10110 ESHELMAN ST BOISE, IDAHO 83704

(Street Address)

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

Name

Address

RICK ANDERSON

10110 ESHELMAN ST BOISE, IDAHO 83704

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

10110 ESHELMAN ST BOISE, IDAHO 83704

6. Future effective date of filing (optional):

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

Signature Rick Anderson

Typed Name: RICK ANDERSON

Signature _____

Typed Name: _____

Secretary of State use only

W 90681

IDAHO SECRETARY OF STATE
02/17/2010 05:00
CK: CASH CT: 245000 BH: 1200351
1 @ 100.00 = 100.00 ORGAN LLC # 2