

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 NOV 13 PM 1:37

SECRETARY OF STATE

	mpany is: STATE OF IDAHO
PROM	MOBILE TRANSPORT LLC
2. The complete street and mailing ad	ddresses of the initial designated/principal office:
	CTORY BOISE IDAHO 83706
(Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street add	ress of the registered agent:
RAYMOND F CLARKSON	622 WEST VICTORY BOISE IDAHO 83706
(Name)	(Street Address)
. The name and address of at least o company:	one member or manager of the limited liability
Name	<u>Address</u>
RAYMOND CLARKSON	622 WEST VICTORY BOISE IDAHO 83706
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. Mailing address for future correspor 622 WEST VIC	ndence (annual report notices): CTORY BOISE IDAHO 83706
	CTORY BOISE IDAHO 83706
622 WEST VIC	a member, or is
e22 WEST VIC  Future effective date of filing (option gnature of organizer(s). (An organizer is a ting in behalf of a member or members).	a member, or is
622 WEST VIC  Future effective date of filing (option gnature of organizer(s). (An organizer is a ting in behalf of a member or members).  gnature	a member, or is
e22 WEST VIC  Future effective date of filing (option gnature of organizer(s). (An organizer is a ting in behalf of a member or members).	a member, or is
622 WEST VIC  Future effective date of filing (option gnature of organizer(s). (An organizer is a ting in behalf of a member or members).  gnature	a member, or is  Secretary of State use only