

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 APR - 1 AM 8: 26

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability company is:	"E OF IDAHO"
	CUSTOM AUTO OF RE	
2.	The complete street and mailing addresses of the initial designated/principal office:	
	220 N PARK AVENUE, SUGAR CITY, ID 83448 (Street Address)	
	(Mailing Address, if different than street address)	
3.	The name and complete street address of the registered agent:	
	BARRY PIERCE 220 N	PARK AVE, SUGAR CITY, ID 83448
	(Name) (Street Address	s)
4.	The name and address of at least one member company:	or manager of the limited liability
		PARK AVE, SUGAR CITY, ID 83448
5.	Mailing address for future correspondence (annual	ual report notices):
	15 West Main Rexburg ID 83440	<u>, , , , , , , , , , , , , , , , , , , </u>
6	Future effective date of filing (optional):	
O.	ruture enective date of filing (optional).	
_	nature of organizer(s). (An organizer is a member, or is	
actır	ng in behalf of a member or members).	Secretary of State use only
Sia	nature	1
	ed Name: BARRY PIERCE	IDANO SECRETARY OF STATE 90027.00 90027.00 94/91/2099 95:996 CX: 2322 CT: 235784 91: 1164811
<i>,</i>		TRANS SEPRETARY OF STATE
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