



**CERTIFICATE OF ORGANIZATION      FILED EFFECTIVE  
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

10 APR -9 PM 3:03

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Complete Glass Solutions llc

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

16095 n Franklin suite 6 Nampa,id 83687

(Street Address)

(Mailing Address, if different than street address)

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

Todd Peugh

27004 Iverson rd Parma,Id 83660

(Name)

(Street Address)

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

Name

Todd Peugh

Address

27004 iverson rd Parma,Id 83660

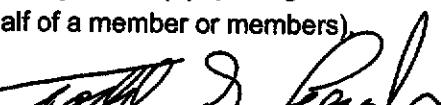
5. Mailing address for future correspondence (annual report notices):

27004 iverson RD Parma, ID 83660

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



Typed Name: Todd S Peugh

Secretary of State use only

Signature

\_\_\_\_

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

LLC Form 101  
07/08  
Revised 07/2008

W 9231  
IDAHO SECRETARY OF STATE  
04/09/2010 05:00  
CX: 417514 CT: 172099 BH: 1217073  
1 @ 100.00 = 100.00 ORGAN LLC 0 2  
1 @ 20.00 = 20.00 EXPEDITE C 0 3