



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

12 FEB 27 AM 10:47

1. The name of the limited liability company is:

AutoPro Repair LLC

SECRETARY OF STATE
STATE OF IDAHO

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

47C North State Street Preston, ID 83263
(Street Address)

(Mailing Address, if different than street address)

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

Travis Casperson
(Name)

958 South Hwy 36 Weston, ID 83286
(Street Address)

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

Name	Address
Megan Casperson	958 South Hwy 36 Weston, ID 83286

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

47C North State Street Preston, ID 83263

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Travis Casperson
Typed Name: Travis Casperson

Signature Megan Casperson
Typed Name: Megan Casperson

Secretary of State use only

IDAHO SECRETARY OF STATE
02/27/2012 05:00
CK: 322 CT: 267393 DH: 1312215
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W111409