



0004031338

**STATE OF IDAHO**

Office of the secretary of state, Lawrence Denney

**CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY**

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$100.00

For Office Use Only

**-FILED-**

File #: 0004031338

Date Filed: 10/13/2020 3:21:25 PM

| Certificate of Organization Limited Liability Company  |  |      |         |                  |   |
|--|--|------|---------|------------------|---|
| Select one: Standard, Expedited or Same Day Service (see descriptions below)   | Standard (filing fee \$100)  |      |         |                  |   |
| 1. Limited Liability Company Name  |  |      |         |                  |   |
| Type of Limited Liability Company  | Limited Liability Company  |      |         |                  |   |
| Entity name  | MKS Automotive Touchup LLC   |      |         |                  |   |
| 2. The complete street address of the principal office is:   |  |      |         |                  |   |
| Principal Office Address   | 620 LINDEN DR.<br>APT #4<br>IDAHO FALLS, ID 83401  |      |         |                  |   |
| 3. The mailing address of the principal office is:   |  |      |         |                  |   |
| Mailing Address  | 620 LINDEN DR<br>APT 4<br>IDAHO FALLS, ID 83401-4963   |      |         |                  |   |
| 4. Registered Agent Name and Address   |  |      |         |                  |   |
| Registered Agent   | Registered Agent<br>michelle k strom<br>Physical Address:<br>620 LINDEN DR.<br>APT #4<br>IDAHO FALLS, ID 83401<br>Mailing Address:<br>620 LINDEN DR<br>APT 4<br>IDAHO FALLS, ID 83401-4963 |      |         |                  |   |
| <input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.   |  |      |         |                  |   |
| 5. Governors   |  |      |         |                  |   |
| <table border="1"><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>michelle k strom</td><td>620 LINDEN DR.<br/>APT #4<br/>IDAHO FALLS, ID 83401</td></tr></tbody></table> |  | Name | Address | michelle k strom | 620 LINDEN DR.<br>APT #4<br>IDAHO FALLS, ID 83401 |
| Name   | Address  |      |         |                  |   |
| michelle k strom   | 620 LINDEN DR.<br>APT #4<br>IDAHO FALLS, ID 83401  |      |         |                  |   |
| Signature of Organizer:  |  |      |         |                  |   |
| <u>Michelle K. Strom</u>   | <u>10/13/2020</u>  |      |         |                  |   |
| Sign Here  | Date   |      |         |                  |   |

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