## FILED EFFECTIVE

	ATE OF ORGANIZ		
	uctions on back of application		
1. The name of the lin	nited liability company is:	Urstant	
	J B AUTO REPAIR I		
2. The complete street 329 S WOODRUFF A	and mailing addresses of the VE IDAHO FALLS ID 83401	initial designated/principal office:	
(Street Address)			
(Mailing Address, if differen		to to a standarde	
3. The name and com	plete street address of the reg	istered agent.	
JOHN BIEHL	341 E 2ND NO	341 E 2ND NORTH RIGBY ID 83442	
(Name)	(Street Address)		
JOHN BIEHL		ORTH RIGBY ID 83442	
	future correspondence (annu	al report notices):	
	future correspondence (annu AVE IDAHO FALLS ID 83401	al report notices):	
329 S WOODRUFF A		al report notices):	
329 S WOODRUFF A 6. Future effective dat Signature of a manag	VE IDAHO FALLS ID 83401		
329 S WOODRUFF A	te of filing (optional):	al report notices):	
329 S WOODRUFF A 6. Future effective dat Signature of a manag	AVE IDAHO FALLS ID 83401 te of filing (optional): ger, member or authorized		
329 S WOODRUFF A 6. Future effective dat Signature of a manag person. Signature	AVE IDAHO FALLS ID 83401 te of filing (optional): ger, member or authorized EHL	IDAHO SECRETARY OF STATE <b>03/24/2011 05 = 00</b> (X: 636751 CT: 172099 BH: 126591 1 # 100.00 = 100.00 ORGAN LLC =	