

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

08 AUG 25 AM 8: 26

(Instructions on back of application)

SECRETARY OF STATE

1.	The name of the limited liability co	mpany is:	STATE OF IVAHU
•	DU	JARTE REPAIRS, LLC	
2.	The complete street and mailing addresses of the initial designated/principal office:		
	723 BORCHER LN #D CALDWELL, IDAHO 83605		
	(Street Address) SAME (Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	MATILDE DUARTE	723 BORCHER LN # D	CALDWELL, ID 83605
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name	Addr	-
	MATILDE DUARTE	723 BORCHER LN # D CALDWELL, ID 83605	
			The state of the s
			İ
5.	Mailing address for future correspor	idence (annual report notic	00/1
		R LN # D CALDWELL, ID 83605	•
		IN LIV # D OALDVELL, ID 83003	
6	Future effective date of filing (option	ol)·	
٠.	. date of ming (option	al).	
Cian			
	a ture of organizer(s) . (An organizer is a g in behalf of a member or members).	member, or is	ļ
acını	g in behalf of a member of members).	Se	cretary of State use only
Sign	ature Mund mut	C. PIME	•
	ed Name: MATILDE DUARTE		
# F. ~		8 Second	IDAHO SECRETARY OF STATE
Signature		formstut C formstoart_org_lic.PMD	1994HU SECRETARY OF STATE 98/25/2008 05:00 CK: 6236 CT: 192263 RH: 1132927
-	ed Name:	wised	1 0 100.00 = 100.00 ORGAN LLC #

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