



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 MAR 10 PM 12:18

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

CT Automotive LLC

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

5450 Seltice Way Unit C, Post Falls ID, 83854
(Street Address)

(Mailing Address, if different than street address)

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

Chris Engelbrecht (Name) 5450 Seltice Way Unit C Post Falls ID 83854 (Street Address)

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

Name	Address
<u>Amber Engelbrecht</u>	<u>14879 N. Wright St, Rathdrum ID</u>
_____	_____
_____	_____
_____	_____

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

5450 Seltice Way Unit C, Post Falls ID, 83854

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

Signature of a manager, member or authorized person.

Signature [Handwritten Signature]
Typed Name: Chris Engelbrecht

Signature [Handwritten Signature]
Typed Name: Amber Engelbrecht

Secretary of State use only

IDAHO SECRETARY OF STATE
03/10/2011 05:00
CK: 5606 CT: 256396 BH: 1263692
1 @ 100.00 = 100.00 ORGAN LLC # 2

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