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CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2014 DEC 10 AM 9:13

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

FLEET LEASE LLC

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

6560 JOHNSTONE ROAD HOMEDALE ID 83628

(Street Address)

(Mailing Address, if different than street address)

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

SEAN WILKE

(Name)

6560 JOHNSTONE RD HOMEDALE ID 83646

(Street Address)

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

Name

Address

SEAN WILKE

6560 JOHNSTONE RD HOMEDALE ID 83646

RANEE WILKE

6560 JOHNSTONE RD HOMEDALE ID 83646

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

6560 JOHNSTONE RD HOMEDALE ID 83646

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

Signature of a manager, member or authorized person.

Signature

Typed Name: SEAN WILKE

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

12/10/2014 05:00

CK:3114 CT:277851 BH:1452439

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