



# CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 MAR 13 AM 9:08

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

DOUBLE B SALES & REPAIR LLC.

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

1040 BOLLER ROAD TR #1 POTLATCH ID. 83855  
(Street Address)

(Mailing Address, if different than street address)

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

MIKE BOLLER  
(Name)

1040 Boller Road #3 Potlatch ID 83855  
(Street Address)

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

Name	Address
<u>Floyd Boller</u>	<u>1040 Boller Rd #1 Potlatch ID 83855</u>
_____	_____
_____	_____
_____	_____
_____	_____

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

1040 BOLLER Rd #1 POTLATCH ID 83855

6. Future effective date of filing (optional): NONE

Signature of a manager, member or authorized person.

Signature Floyd Boller  
Typed Name: Floyd Boller

Signature \_\_\_\_\_  
Typed Name: \_\_\_\_\_

Secretary of State use only

W135458

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03/13/2014 05:00  
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