



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

12 APR 30 AM 10:25

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

INTERSTATE AUTO LLC

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

1140 S. POWERLINE Rd NAMPA, ID 83686

(Street Address)

(Mailing Address, if different than street address)

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

SORIN V. PICA

(Name)

1140 S. POWERLINE Rd Nampa ID 83686

(Street Address)

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

Name

SORIN V. PICA

Address

1140 S. Powerline Rd Nampa ID 83686

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

1140 S. Powerline Rd Nampa ID 83686

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: _____

SORIN V. PICA

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
04/30/2012 05:00
CK: CASH CT: 250307 BH: 1321930
1 @ 100.00 = 100.00 ORGAN LLC # 2

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