



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 NOV 12 AM 8:40
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

CIRCLE AUTO LLC

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

329 S WOODRUFF AVE IDAHO FALLS ID 83401

(Street Address)

(Mailing Address, if different than street address)

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

CHRIS HANOSKY

(Name)

329 S WOODRUFF AVE IDAHO FALLS ID 83401

(Street Address)

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

Name

Address

CHRIS HANOSKY

329 S WOODRUFF AVE IDAHO FALLS ID 83401

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

329 S WOODRUFF AVE IDAHO FALLS ID 83401

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature _____

Typed Name: CHRIS HANOSKY

Signature _____

Typed Name: _____

Secretary of State use only

g:\options\LLC forms\cert_org_llc.PMD
Revised 07/2008

IDAHO SECRETARY OF STATE
11/12/2008 05:00
CK: 1459 CT: 231346 BH: 1144023
1 @ 100.00 = 100.00 ORGAN LLC # 2

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FILED EFFECTIVE