

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

10 NOV 19 AM 8: 10

1.	The name of the limited liability co	mpany is:	SECRETARY OF STATE STATE OF IDAHO	
	1	Γhe Paint Shop, LLC	OPAR OF IDAHO	
2.	The complete street and mailing addresses of the initial designated/principal office:			
	3630 Country Club Court, Lewiston ID 83501			
	(Street Address)		William	
	(Mailing Address, if different than street address)		:	
3.	The name and complete street add	lress of the registe	red agent:	
			Court, Lewiston ID 83501	
	(Name)	(Street Address)		
	The name and address of at least one member or manager of the limited liability company:			
	<u>Name</u>		Address	
	Cory Triplett	3630 Country Club Court, Lewiston ID 83501		
				
5. N	Mailing address for future correspondence (annual report notices):			
	3630 Country Club Court, Lewiston ID 8	3501		
6. F	Future effective date of filing (option	nal):		
-	ature of a manager, member or	authorized		
perso	on.		Secretary of State use only	
Siana	ature Management		,	
	d Name: Cory Triplett			
. , po			TRAID OF COMME	
Signa	ature		IDAHO SECRETARY OF STATE 11/19/2010 05:00 CK: 2055 CT: 252928 RM: 1247442	
Typed Name:			1 8 100.00 = 100.00 ORGAN LLC # 2	

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