	ARTICLES OF C	DRGANIZATION
	AMITED LIABIL	
		ack of application)
	SB 1 AND TO ANOT COLOURS ON DA	
1.	The name of the limited liability compan	IV IS: RESTORED EMERGENCY VEHICLES,
	I C.	-
2.	The address of the initial registered offic	eis: <u>2291 S. Amy Avenue</u> ,
	Boise, ID 83706	
	agent at that address is: <u>Kenneth</u> Pe	eterson and the name of the initial registered
	Signature of registered agent : Kurn	Al Setuse
		<u> </u>
3.	Is management of the limited liability corr	pany vested in a manager or managers?
	Yes 🖸	NO (check appropriate box)
4.	If management is vested in one or more	manager(s), list the name(s) and address(es) of at
	least one initial manager. If management	t is vested in the members, list the name(s) and
	address(es) of at least one initial member <u>Name:</u>	Address:
	Kenneth Peterson	2291 S. Amy Avenue
		Boise, ID 83706
	· ·	
		-
		-
5.	Signature of at least one person listed in #	
5.	Signature of at least one person listed in #	
5.	Signature of at least one person listed in #	
5.	Signature of at least one person listed in #	#4 above:
5.	Signature of at least one person listed in #	IDANO SECRETARY OF STATE
5.	Signature of at least one person listed in #	#4 above: 
5.	Signature of at least one person listed in #	#4 above: 
5.	Signature of at least one person listed in #	#4 above: 