

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 AUG -4 PM 1:18

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

~~Glass Pro LLC~~ Pro GLASS LLC

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

4902 W. Tournament Drive

(Street Address)

Meridian, ID 83646

(Mailing Address, if different than street address)

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

Dennis R. Collins

(Name)

4902 W. Tournament Dr. Meridian, ID 83646

(Street Address)

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

Name

Address

Dennis R. Collins

4902 W. Tournament Dr. Meridian, ID 83646

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

4902 W. Tournament Dr. Meridian, ID 83646

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 *Dennis Collins*

Typed Name: Dennis R. Collins

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
08/04/2009 05:00
CK: 581 CT: 239388 BH: 1101513
1 @ 100.00 = 100.00 ORGAN LLC # 2

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