## **FILED EFFECTIVE**



## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

2007 AUG 13 PM 3 39

(instructions on t	pack of application)	STATE OF IDA	
1. The name of the limited liability company is:		SIMIL OF ID.	
Complete Car Care Center 43			
2. The street address of the initial re			
13965 W. Chinden Blvd., Ste. 1			
and the name of the initial registe  Jason W. Berrett	red agent at the ab	ove address is:	
3. The mailing address for future con	respondence is:		
13965 W. Chinden Bivd., Ste. 1	10, Boise, ID 837	13	
4. Management of the limited liability		<del></del>	
Manager(s) or Member(s)	<del></del>	appropriate box)	
6. If management is to be vested in o address(es) of at least one initial member(s), list the name(s) and address.	IRDADAL Itmanaca	managin in in her her course to the second	
Name		Address	
Berrett Financial Group, Inc.	13965 W. Chir	13965 W. Chinden Blvd., Ste. 110	
	Boise, ID 837	Boise, ID 83713	
6. Signature of at least one person res	ponsible for formin	g the limited liability company:	
Typed Name: Jason W. Berrett	1	Socretary of State use only	
Capacity: Pres. Berrett Financial Gr	oup, Inc.		
Signature	i n		
Signature Typed Name:	TICHER TO THE STATE OF THE STAT	IDAHO SECRETARY OF STATE	
Capacity:	{1	CX: 12440% CT: 172099 BH: 1070508 1 0 100.00 = 100.00 ORGAN LIC # A	

1 0 20.00 = 20.00 EXPEDITE C 5

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