

# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typed).

For Office Use Only

**-FILED-**

File #: 0005641403

Date Filed: 2/20/2024 2:49:00 PM

1. The name of the limited liability company is:

**North Idaho Collision Repair Center, LLC**

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

**148 David Thompson Dr., Bonners Ferry, ID 83805**

(Street Address)

(Mailing Address, if different)

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

**Carla Pulsifer**

(Name)

**148 David Thompson Dr., Bonners Ferry, ID 83805**

(Address)

4. The name and address of at least one governor of the limited liability company:

**Steven Pulsifer**

(Name)

**148 David Thompson Dr., Bonners Ferry, ID 83805**

(Address)

**Carla Pulsifer**

(Name)

**148 David Thompson Dr., Bonners Ferry, ID 83805**

(Address)

(Name)

(Address)

(Name)

(Address)

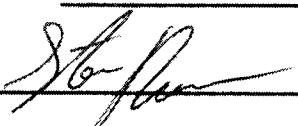
5. Mailing address for future correspondence (annual report notices):

**PO Box C, Sandpoint, Idaho 83864**

(Mailing Address)

Signature of organizer(s).

Printed Name: Steven Pulsifer

Signature: 

Secretary of State use only

Printed Name: Carla Pulsifer

Signature: 

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2:49 PM Received by

Office of the Idaho Secretary of State

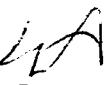
NORTH IDAHO

# COLLISION REPAIR

CENTER

February 14, 2024

I, Shane Florea, give consent to Steve and Carla Pulsifer to use the name North Idaho Collision Repair Center as an LLC.

  
Shane Florea, President  
North Idaho Collision Repair Center  
148 David Thompson Drive  
Bonners Ferry, ID 83805