



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2015 FEB 17 AM 9:35

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

A PLUS REPAIR AND INVESTMENTS, LLC

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

755 N ARTHUR, POCA TELLO ID 83204

(Street Address)

(Mailing Address, if different than street address)

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

DIANNA BURDEN

(Name)

265 N FIRST E DOWNEY, ID 83234

(Street Address)

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

**Name**

**Address**

RALPH L BAKER

755 N ARTHUR, POCA TELLO ID 83204

SHIRLEY E BAKER

755 N ARTHUR, POCA TELLO ID 83204

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

P O BOX 144 DOWNEY, ID 83234

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Ralph L Baker

Typed Name: RALPH L BAKER

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

02/17/2015 05:00

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