



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

10 JUL -8 PM 3:38

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

1st Mobile Mechanic LLC

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

1199 W. Shire ave
(Street Address)

Meridian ID 83642
(Mailing Address, if different than street address)

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

Juan A Cazares
(Name)

1199 W. Shire ave
(Street Address)

Meridian ID 83642

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

Name

Address

Juan A Cazares

1199 W. Shire ave Meridian ID 83642

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

1199 W. Shire ave Meridian ID 83642

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

Typed Name:

Juan A Cazares

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
07/08/2010 05:00
CK: 2243 CT: 96603 BH: 1229891
1 @ 100.00 = 100.00 ORGAN LLC #

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