

CERTIFICATE OF ORGANIZATIONLED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application) = 1007 11 AM 9: 09

1.	The name of the limited liability cor	mpany is: asis Auto Spa, L.	SECRETARY OF STA TE L.C. STATE OF IDAHO	
2.	The complete street and mailing addresses of the initial designated/principal office: 1652 Woodruff Park, Idaho Falls, ID 83401 (Street Address)			
	(Mailing Address, if different than street address)	***************************************		
3.	The name and complete street address of the registered agent:			
	Gary L. Randleas		1652 Woodruff Park, Idaho Falls, ID 83401 (Street Address)	
4.	The name and address of at least one member or manager of the limited liability company: Name Address			
	Gary L. Randleas	1652 Woodruff Park, Idaho Falls, ID 83401		
_			al report potions):	
J.	. Mailing address for future correspondence (annual report notices): 1652 Woodruff Park, Idaho Falls, ID 83401			
	Future effective date of filing (option		1, 2011	
_	nature of a manager, member or rson.	authorized ,		
Sia	mature Cany L. Randle	مہ	Secretary of State use only	
_	ped Name: Gary L. Randleas			
Sig	mature Karen a. Randle	20	IDAHO SECRETARY OF STATE 10/11/2011 05:00 CK: 2957 CT: 263152 BH: 1293597 1 0 100.00 = 100.00 ORGAN LLC # 2	
Тур	oed Name: Karen A. Randleas			

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