



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
10 MAY 25 AM 8:16

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

PROOST FAMILY FARMS, LLC

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

2794 Addison Ave E, Twin Falls, ID 83301

(Street Address)

PO Box 186, Twin Falls, ID 83303

(Mailing Address, if different than street address)

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

Verlyn Jay Proost

(Name)

2794 Addison Ave E, Twin Falls, ID 83301

(Street Address)

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

Name

Address

John Ryan Proost

PO Box 186, Twin Falls, ID 83303

Nickolas Jay Proost

PO Box 186, Twin Falls, ID 83303

Verlyn Jay & Elaine Proost Family Trust

PO Box 186, Twin Falls, ID 83303

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

PO Box 186, Twin Falls, ID 83303

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 Verlyn Jay Proost
Typed Name: Verlyn Jay Proost

Signature _____
Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
05/25/2010 05:00
CK: 1929 CT: 233790 BH: 1223060
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