



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 MAY 30 AM 8:55

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

BARNES EXPRESS LLC

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

215 LOGAN STREET McCAMMON ID 83250

(Street Address)

PO BOX 231 McCAMMON ID 83250

(Mailing Address, if different than street address)

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

BRAD D BARNES

(Name)

215 LOGAN STREET McCAMMON ID 83250

(Street Address)

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

Name

Address

BRAD D BARNES

215 LOGAN STREET McCAMMON ID 83250

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

PO BOX 231 McCAMMON ID 83250

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature *Brad D Barnes*
Typed Name: BRAD D BARNES

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

05/30/2014 05:00

CK:5097 CT:216107 BH:1426985

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