

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED

(Instructions on back of applications JAN 15 AM 9: 17

| 1. | The name of the limited liability company is: | Moncur Distributing Full. C. |
|----|---|---|
| 2. | The address of the initial registered office is: 83404 | and the name of the initial registered |
| | agent at that address is: Brian Mond | and the name of the initial registered |
| | Signature of registered agent : | More |
| 3. | Is management of the limited liability compar | ny vested in a manager or managers? No (check appropriate box) |
| 4. | If management is vested in one or more man least one initial manager. If management is valid address(es) of at least one initial member. Name: | nager(s), list the name(s) and address(es) of at vested in the members, list the name(s) and Address: |
| | Brian Moncur | 330 East 21st Street |
| | | Idaho Falls, ID. 83404 |
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| | | |
| 5. | Signature of at least one person listed in #4 a | above: |
| | | |
| | | g CK: 3416 CT: 189693 BH: 179234 |
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