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CERTIFICATE OF ORGANIZATIONFILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2010 DEC 27 PH 4: 33

The name of the limited liab	oility company is:	SEURETART DE LIATE STATE OF IDAHO
	Crystal Water LLC	₹
2. The complete street and ma	iling addresses of the init	ial designated/principal office:
523 W. 19th St. Idaho Falls, ID (Street Address)		
(Mailing Address, if different than street	address)	
3. The name and complete stre	eet address of the registe	red agent:
Joseph K. Blakley	1070 Midway Ave.	Ammon, ID 83406
(Name)	(Street Address)	
The name and address of at company: Name	t least one member or ma	nager of the limited liability
Joseph Blakley	1070 Midway Ave.	Ammon, ID 83406
. Mailing address for future co	prespondence (annual re	port notices):
523 W. 19th St. Idaho Falls, ID	,	•
. Future effective date of filing	(optional):	
ignature of a manager, mem erson.	ber or authorized	Secretary of State use only
anature - 2 4 Ru	a de danse	Goodway of Guillo Good only
ped Name: Joseph K. Blakley		
gnature		IDAHO SECRETARY OF STATE
/ped Name:	!	12/28/2010 05:00 CK: 571995 CT: 172899 BH: 1252621 1 0 188.00 = 168.08 ORGAN LLC # 2