

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 08 DEC 11 PM 1: 08

(Instructions on back of application)

SECRETARY OF STATE

1.	The name of the limited liability com	pany is:		STATE UF IDAHO"
	Patte	erson Trucking	, LLC	i
2.	The complete street address, and mailing address if different, of the initial designated/principal office:			
	531 Hooper	Ln., Oldtown,	Idaho 83822	!
3.	The name of the commercial registered agent; or the name and complete street address of the non-commercial registered agent:			
	National Registered Agents, Inc. 1423 Tyrell Lane Boise, ID 83706 County of Ada			
4.	The name and address of at least one member or manager of the limited liability company: Name Address			
	Stanley Patterson	531 Hooper Ln., oldtown, Idaho 83822		
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5.	Mailing address for future correspondence (annual report notices): 531 Hooper Ln., Oldtown, Idaho 83822			
	531 Hooper	Ln., Oldtown,	Idaho 83822	
6	Future effective date of filing (options	•I)·		
U.	r dure enective date or ming (options	ai)	·	
Sig	nature of an organizer(s). (An organizer	is a member,		
	s acting in behalf of a required, and existing, in	nitial member		Desired of State was sale
or n	nembers).		OF C	Secretary of State use only
Sig	nature /		[문 발	
Туј	ped Name: Karmelia Fredrick, Legalzo	om.com, Inc.	8 80 PT	IDANO SECRETARY OF STATE
			07/200	CK: 215888 CT: 167623 BH: 1147934
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Туг	ped Name:		8 8 8	

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