



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2012 MAY 29 AM 9:5

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Thrive Spring Water, LLC

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

116 Prairie Dunes Circle, Jerome, ID 83338

(Street Address)

(Mailing Address, if different than street address)

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

Walter H. Haines

(Name)

116 Prairie Dunes Circle, Jerome, ID 83338

(Street Address)

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

Name

Address

Walter H. Haines

116 Prairie Dunes Circle, Jerome, ID 83338

Sonya E. Black

116 Prairie Dunes Circle, Jerome, ID 83338

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

116 Prairie Dunes Circle, Jerome, ID 83338

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Walter Haines

Typed Name: WALTER HAINES

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
05/29/2012 05:00
CK: 1500 CT: 270079 BH: 1325904
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