## FILED EFFECTIVE



## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014 APR -4 AM 9: 07

(Instructions on back of application)

1.	The name of the limited liability con Crawford Farms, L.L.C.	npany is:	STATE OF IDAHO
2.	The complete street and mailing add 6814 Hells Gulch Rd.	dresses of the initial	designated office:
	(Street Address) St. Maries, ID 83861		
2	(Mailing Address, if different than street address)  The pages and complete street address of the registered agents		
3.	The name and complete street address of the registered agent:		
	Staci Crawford	6814 Hells Gulch Rd.	St. Maries, ID 83861
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name		Address
	Monty Todd Crawford	6814 Hells Gulch Rd.	St. Maries, ID 83861
		<u> </u>	
5	Mailing address for future correspondence (annual report notices):		
Ű.	6814 Hells Gulch Rd. St. Maries, ID 83861		
6.	uture effective date of filing (optional):		
	-	•	
	nature of a manager, member or son.	authorized	
-	6		Secretary of State use only
Sig	nature		
Typ	ped Name: / Monty Toga Crawford	·	
			STATE
	nature		1DAHO SECRETARY OF STATE 04/04/2014 05:00 04/04/2014 1418598
Тур	ped Name:		IDAHO SECRETARY OF 35 200 04/04/2014 05 200 CK: 4273 CT: 295220 BH: 1418590 1 8 100.00 = 100.00 ORGAN LLC # 2
		ľ	