

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 2017 HIN 15 AM 9: 12

			fort 2011 10 1111 1
701	(Instructions on back	of application)	SECHARRY OF STATE
). T	he name of the limited liability com	npany is:	STATE OF IDAHO
	Dix	ie Agronomics, LLC	
. T	he complete street and mailing add	dresses of the initia	al designated office:
	PO Box 4, Burley, ID 83318		
	(Street Address)		
-	324 E 200 S Burley ID 83 (Mailing Address, if different than street address)	3318	
			- I see als
5. II	The name and complete street address of the registered agent:		
ı	Kevin Mallory	324 E 200 S, Burley	. ID 83318
	(Name)	(Street Address)	, -
	The name and address of at least one member or manager of the limited liability		
C	ompany:		111
	Name.	A IF O OCO F Building	Address
-	Jarrod Mallory	145 S 350 E Burley	, ID 83318
	Kevin Mallory	324 E 200 S, Burley	/, ID 83318
-			
-			
-			
5. M	Mailing address for future correspondence (annual report notices):		
	Po Box 4 Burley ID 83318		
-	10 DOX 4 Bulley ID 03		
8. F	uture effective date of filing (option	al):	
	5.1		
igna	ature of a manager, member or	authorized	
erso	_		
	100		Secretary of State use only
igna	iture / /a / /a		
	- Later - Khizin Mollow		

Typed Name: Kevin Mallory Signature__

Typed Name: ___

IDANO SECRETARY OF STATE

06/15/2012 05:00

CK: 3379 CT: 271490 BH: 1328481
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