

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE 2005 SEP 14 AM 8: 50

(Instructions on back of application)

| The name of the limited liability company is: Konen Farms, LLC | | | STEELFE |
|--|------------------|---|--|
| The street address of the initial re 32073 Waha Road, Lewiston, | | S : | |
| and the name of the initial register | red agent at the | above addr | ess is: |
| The mailing address for future cor 32073 Waha Road, Lewiston, l | | · · · · · · · · · · · · · · · · · · · | |
| Management of the limited liability | y company will b | e vested in: | |
| Manager(s) X or Member(s) | | ck the appropriat | e box) |
| If management is to be vested in a address(es) of at least one initial member(s), list the name(s) and a | manager. If mar | nagement is | to be vested in the |
| Name | | | Address |
| Robert Konen | 320 | 32073 Waha Road, Lewiston, ID 83501 | |
| Molly Konen | 320 | 73 Waha Ro | oad, Lewiston, ID 83501 |
| | | | |
| | | | |
| . Signature of at least one person r | esponsible for f | orming the li | |
| Signature: Robert Konen Wanager | | nkzalion.p65 | Secretary of State use only |
| Capacity: Manager | | rtachorga | |
| Signature | nen | orpkomski i Chomakarbokorganizaton pBS Ravised 07/2002 | IDANO SECRETARY OF STAT 09/14/2005 05: CK: 3793 CT: 192259 BH: 9 |
| Capacity: Assistant Manager | | orpifor Re | 1 # 199.90 = 189.00 ORGAN |

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