



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 MAY 26 AM 10: 08

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

KL NIELSEN TRANSPORT, LLC

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

151 NORTH 600 WEST, PAUL, IDAHO 83347

(Street Address)

(Mailing Address, if different than street address)

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

DIANE NIELSEN

(Name)

151 NORTH 600 WEST, PAUL, ID 83347

(Street Address)

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

Name

Address

DIANE NIELSEN

151 NORTH 600 WEST, PAUL, ID 83347

KODY LYNN NIELSEN

4095 MEADOWRIDGE CIR, TWIN FALLS, ID 83301

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

151 NORTH 600 WEST, PAUL, ID 83347

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Diane Nielsen

Typed Name: DIANE NIELSEN

Signature Kody L. Nielsen

Typed Name: KODY LYNN NIELSEN

Secretary of State use only

IDAHO SECRETARY OF STATE

05/26/2015 05:00

CK:8566 CT:293860 BH:1476979

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