## FILE FFEATIVE ES OF ORGANIZATION OTFEB 21 AM 8: 56 SEURCHARY OF CAR (Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited ability company is: Neil R. Thomas Farms, L.L.C.						
2.	(not a PO Box)						
	agent at that address is: Neil R. Thomas						
	Signature of registered agent: Do R Thomas						
3.	The latest date certain on which the limited	liability	compai	ny wil	dissolv	e: Dec.	31, 2031
ļ.	Is management of the limited liability compa ☐ Yes ☐ ☒		ted in a			managers?	
5.	If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member.  Name:  Address:						
	Neil R. Thomas	225			_	Dustau	T.D.
						Burley,	
	Carla M. Thomas	225	South	150	<u>East,</u>	Burley,	ID
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		<u> –</u>					
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· · · · · · · · · · · · · · · · · · ·	Signature of at least one person listed in #5 above:						
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			d 8/96			142551 BH: 38	
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