



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2009 JAN -5 AM 9:30

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

MJ Gooding Development, LLC

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

303 Main Street, Gooding, ID 83330

(Street Address)

PO Box 83, Gooding, ID 83330

(Mailing Address, if different than street address)

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

Ms. Gayle Wood

(Name)

303 Main Street, Gooding, ID 83330

(Street Address)

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

Name

Joseph F. Knox

Address

PO Box 83, Gooding, ID 83330

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

PO Box 83, Gooding, ID 83330

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature _____

Typed Name: Joseph F. Knox

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
01/05/2009 05:00
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