

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2008 JUL 22 PM 3: 16

STATE OF IDAHO

The name of the limited liability co	
	Joe Porter, LLC
	ddresses of the initial designated/principal office:
	d Alley Shelley, Idaho 83274
(Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street add	dress of the registered agent:
Joe Porter, LLC	270 Spud Alley Shelley, Idaho 83274
(Name)	(Street Address)
The name and address of at least company:	one member or manager of the limited liability
<u>Name</u>	<u>Address</u>
AJ Searle	526 E. 1200 N. Shelley, Idaho 83274
Jeff Porter	761 W. 100 S. Provo, UT 84601
5. Mailing address for future correspondent	ondence (annual report notices):
	ud Alley Shelley, Idaho 83274
6. Future effective date of filing (option	onal):
Signature of organizer(s). (An organizer is acting in behalf of member or members).	Secretary of State use only
Signature	
Typed Name: AJ Searle	IDAHO SECRETARY OF STATE OF CK: 134634 CT: 17299 BH: 1
Signature	IDAHO SECRETARY OF STATE
Typed Name:	O7/22/2008 05: CK: 134634 CT: 172099 BH: 11

X: 134634 CT: 172099 BH: 1120251 1 0 100.00 = 100.00 ORGAN LLC # 2

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