

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

SECRETARY OF STATE

. The name of the limited liability co	ompany is:
THE PETERSEN F	FAMILY LIMITED LIABILITY COMPANY
The complete street and mailing a	ddresses of the initial designated/principal office:
	th 4500 East, Rigby, ID 83442
(Street Address)	
(Mailing Address, if different than street address)	
 The name and complete street add 	dress of the registered agent:
Lary S. Larson	428 Park Ave., Idaho Falls, Idaho 83402
(Name)	(Street Address)
company: <u>Name</u> Henry M. Petersen	<u>Address</u> 314 North 4500 East, Rigby, ID 83442
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	And the second s
5. Mailing address for future correspo	ondence (annual report notices):
-	O. Box 51219, Idaho Falls, Idaho 83405
	162
Future effective date of filing (option)	onal):
lignature of organizer(s). (An organizer is cting in behalf of a member or members)	
	Secretary of State use only
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<i>1</i>	TO ALLANCE
Signature Hung McSulus Typed Name: Henry M. Peterse	w 90137
<i>A</i>	IDAHO SECRETARY OF STATE OF ST