

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 OCT -9 AM 8:47

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Sullivan Farm, LLC

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

3239 Falls Avenue East, Twin Falls, ID 83301

(Street Address)

(Mailing Address, if different than street address)

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

Debbie A. Hall

3239 Falls Avenue East, Twin Falls, ID 83301

(Name)

(Street Address)

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

Name

Address

Debbie A. Hall

3239 Falls Avenue East, Twin Falls, ID 83301

Terrance Sullivan

1585 Royal Crest Drive, Elko, NV 89801

Gary P. Sullivan

64 Portland Place, Staten Island, NY 10301

Becky Ford

12411 East Sioux Circle, Spokane, WA 99208

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

3239 Falls Avenue East, Twin Falls, ID 83301

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 Debbie A. Hall
Typed Name: Debbie A. Hall

Signature _____
Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
10/09/2009 05:00
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