



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 MAR -4 AM 8:50

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

DEREK REED FARMS, LLC

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

2865 MARY DR IDAHO FALLS, ID 83402

(Street Address)

(Mailing Address, if different than street address)

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

DEREK REED

(Name)

2865 MARY DR IDAHO FALLS, ID 83402

(Street Address)

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

Name

Address

DEREK REED

2865 MARY DR IDAHO FALLS, ID 83402

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

2865 MARY DR IDAHO FALLS, ID 83402

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Derek Reed

Typed Name: Derek Reed

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
03/04/2011 05:00
CK: 1513 CT: 256185 BH: 1262725
1 @ 100.00 = 100.00 ORGAN LLC # 2

W101137