





## STATE OF IDAHO Office of the secretary of state, Phil McGrane CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

-FILED-

File #: 0005168202

Date

Date Filed: 3/27/2023 12:31:33 PM

| Certificate of Organization Limited Liability Com<br>Select one: Standard, Expedited or<br>descriptions below) |                         | Expedited (+\$40; filing fee \$140)                  |
|--|-------------------------|--|
| 1. Limited Liability Company Name  |                         |  |
| Type of Limited Liability Company  |                         | Limited Liability Company                            |
| Entity name  |                         | Rogue River Transportation LLC                       |
| 2. The complete street address of the principal Principal Office Address                                       | ffice is:               | KYLE BRADEN<br>411 W 600 S<br>HEYBURN, ID 83336-7643 |
| 3. The mailing address of the principal office is:   |                         |  |
| Mailing Address  |                         | KYLE BRADEN  |
|  |                         | 411 W 600 S<br>HEYBURN, ID 83336-7643                |
| 4. Designated Asset Names and Address  |                         |  |
| Registered Agent Name and Address     Registered Agent   |                         | Registered Agent                                     |
| Trogistered Agent  |                         | Stephani Merrigan                                    |
|  |                         | Physical Address:                                    |
|  |                         | 529 F STREET<br>RUPERT, ID 83350                     |
|  |                         | Mailing Address:                                     |
|  |                         | STEPHANI MERRIGAN                                    |
|  |                         | PO BOX 533   |
|  |                         | RUPERT, ID 83350-0533                                |
| I affirm that the registered agent   | appointed has consented | I to serve as registered agent for this entity.      |
| 5. Governors   |                         |  |
| Name   | Address                 |  |
| Kyle Braden  | 411 W 600 S             |  |
| HEYBURN, ID 83336-7643   |                         | 7643   |
| Signature of Organizer:  |                         |  |
| organizar.   |                         |  |
| Kyle Braden  |                         | 03/27/2023   |

Sign Here