

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014 FEB 21 AM 9:21

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

James G. Larson Trucking, LLC

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

1062 Guernsey Cutoff, Pottlatch, ID 83855

(Street Address)

(Mailing Address, if different than street address)

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

James G. Larson

(Name)

1062 Guernsey Cutoff, Pottlatch, ID 83855

(Street Address)

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

Name

Address

James G. Larson

1062 Guernsey Cutoff, Pottlatch, ID 83855

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

1062 Guernsey Cutoff, Pottlatch, ID 83855

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature: *James G. Larson*
Typed Name: James G. Larson

Signature: _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/21/2014 05:00
CK: 10473 CT: 293262 BH: 1411642
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