

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 MAY 10 AM 9: 29

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability comp	any is:		
	Powell Family Es	terprises, L.L.C.		
2.	Powell Family Enterprises, L.L.C. The complete street and mailing addresses of the initial designated office:			
	(Street Address)	Garden Valley, ID 83622		
	(Mailing Address, if different than street address)			
3.	3. The name and complete street address of the registered agent:			
	(Name) Powell	16 Brook View In Garden Valley i Street Address) 836-	ID ID	
	I. The name and address of at least one member or manager of the limited liability company:			
	Name	Address		
	Bill Powell	Address 16 Brook View Ln, Garden Valley, (1 8362	ZD	
	Debbie Powell	11 8362	L	
5. Mailing address for future correspondence (annual report notices):				
same				
6.	Future effective date of filing (optional	:		
O:				
pers	nature of a manager, member or a son.	itnorized		
Sigr	nature Bell Ruell	Secretary of State use only		
_	ed Name: Bill Powell			
Siar	nature <u>Weblue Porwell</u>	IDAHO SECRETARY OF STATE 95/10/2013 95:06 CK: 3664 CT: 282996 BH: 137326		
_	ed Name: Debhi Powell	1 0 100.00 = 100.00 ORGAN LLC #	2	

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