

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2015 MAR 12 PM 4: 41

	(Instructions on back of a	pplication)	SECRETARY OF STATE STATE OF IDAHO
1. The name	of the limited liability compan	y is:	_
Foot	THILLS DISTR	BUTING,	LLC
	ete street and mailing address . 30 x 14 0 4 ss) -07 ALW02TH ess, if different than street address)		
Mailing Addr	ess. if different than street address)	5 T. GA2	DEM CITY, ID.
	and complete street address		83214
TANEC (Name)	PWI-KELER (St	reet Address) ENGL	E, 10 83616
4. The name company:	and address of at least one m	nember or manager o	f the limited liability
_	J. WHEELER	Add	ress
5. Mailing ad	dress for future corresponden	ce (annual report noti	ces):
<u>P.o.</u>	BUX 140436	BOISE,	10. 83714
6. Future effe	ective date of filing (optional):		
Signature of person.	a manager, member or aut	horized	
· d	traistille		Secretary of State use only
Signature Typed Name:	Tabour T Whe		DAMO SECRETARY OF STATE
ryped Haille.	TABLES OF ACTION	CK: 265	03/13/2015
Signature		16 ±60	.00 = 100.00 ORGAN LLC #
Typed Name:			

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