

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY MAR -2 PM 1: 50

To B	(Instructions on back	of application)
1.	The name of the limited liability con	of application) STATE OF TOAHO pany is:
CHANDLER FARMS, LLC		
2.	The complete street and mailing add 1692 E 3000 S, Wendell, ID 83355	dresses of the initial designated/principal office:
	(Street Address)	
	(Mailing Address, if different than street address)	
3.	The name and complete street address of the registered agent:	
	F. Wayne Chandler	1692 E 3000 S, Wendell, ID 83355
	(Name)	(Street Address)
4. The name and address of at least one member or manager of the limited liability company:		ne member or manager of the limited liability
	Name	Address
	F. Wayne Chandler	1692 E 3000 S, Wendell, ID 83355
	Deborah R. Chandler	1692 E 3000 S, Wendell, ID 83355
5. Mailing address for future correspondence (annual report notices):		lence (annual report notices):
	1692 E 3000 S, Wendell, ID 83355	
6. Future effective date of filing (optional):		
Signa perşe	ature of a manager, member or a	authorized
,		Secretary of State use only
Signature & Wayse Chendle		
Туре	d Name: F. Wayne Chandler	
Signa	ature <u>Deborah R. Band</u>	let_ TRAIN OF OFFICE STATE
Typed Name: Deborah R. Chandler 93/02/2011 05:90		

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