DEC-9-2014 02:14P FROM:

TO: 12087335553

P.1

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FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 DEC -9 PM 4: 20

SEGPETARY OF WINTE

| | (matruotions on | a pack of application | 9 817 | HE O |
|--|--|-----------------------|---|---------------|
| . The name | of the limited liabili | ity company is: | | |
| MACRAE | FAMILY, LLC | | | |
| | | | Initial designated office: | |
| | TH 950 WEST, HEYBUR | RN, ID 83366 | | |
| (Street Addre | | | | |
| (Malling Add | ress, if different than street ad | dress) | · | |
| The name | and complete stree | at address of the reg | jistered agent: | |
| JOANN M | IACRAE | 355 SOUTH 9 | 950 WEST, HEYBURN, ID 83366 | |
| (Name) | | (Street Address) | (Street Address) | |
| The name company: | | east one member of | r manager of the limited liability | |
| | <u>Name</u> | | Address | |
| DONALD | D. MACRAE | 355 SOUTH 9 | 950 WEST, HEYBURN, ID 83366 | |
| JOANN W | IACRAE | 355 SOUTH 9 | 950 WEST, HEYBURN, ID 83366 | |
| NAOMI L. | MACRAE | 355 SOUTH 9 | 950 WEST, HEYBURN, ID 83366 | |
| LAURIE A | A. SCHMITT | 355 SOUTH 9 | 950 WEST, HEYBURN, ID 83366 | - |
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| | ddress for future com TH 950 WEST, HEYBUR | • | at report notices): | |
| 300 200 | TH 950 WEST, HETBUF | KN, ID 63366 | | |
| Future eff | fective date of filing (| (ontional): | • | |
| . Tutale on | CONTO GOICO OT MINIS (| (opaonar). | | |
| onature of | a manager, memt | ber or authorized | | |
| erson. | | | Secretary of State use only | |
| (| LOW THE | 201800 | Secretary of State and Only | |
| gnature DUM NULLAGE (Ded Nama, JOANN MACRAE | | | IDAHO SECRETARY OF | STAT |
| yped Name: | JON WY WACKAE | | 12/09/2014 05 | :00 |
| a | | | CK:2415246 CT:172099 1 | |
| ignature | | | 16 100.00 = 100.00 OR | JAA. |

9/21/2012

Typed Name: _____