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STATEMENT OF CONVERSION OF

STUKENHOLTZ FARMS LLP, an Idaho limited liability partnership

SECRETARY OF STATE STATE OF IDAHO

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INTO

STUKENHOLTZ FARMS LIMITED LIABILITY COMPANY, an Idaho limited liability company

- 1. Name, Jurisdiction, and Type of Converting Entity. The name of the converting entity is Stukenholtz Farms LLP, which is an Idaho limited liability partnership (the "Converting Entity").
- 2. Name, Jurisdiction, and Type of Converted Entity. The name, jurisdiction of organization, and type of the converted entity is Stukenholtz Farms Limited Liability Company, which will be an Idaho limited liability company ("Converted Entity").
- 3. Approvals. The Plan of Conversion was approved in accordance with applicable provisions of the Idaho Entity Transactions Act, Idaho Code § 30-18-101 et seq.
- 4. Public Organic Document. A true and correct copy of the Certificate of Organization of the Converted Entity is attached hereto as *Exhibit A*.
- 5. Plan of Conversion. The executed Plan of Conversation is on file at the principal place of business of the Converted Entity.

DATED effective as of the 3/ day of October, 2008.

STUKENHOLTZ FARMS LLP

Joyce Stukenholtz, Partner

IDAHO SECRETARY OF STATE
11/10/2008 05:00
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CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

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(Instructions on back of application)

SECRETARY OF STATE

The name of the limited liability com	npany is:
Stukenholtz Fa	arms Limited Liability Company
The complete street address, and m principal office:	nailing address if different, of the initial designated/
3420 Moonligh	nt Drive, Kimberly, Idaho 83341
The name of the commercial register address of the non-commercial regi	ered agent; or the name and complete street stered agent:
lda	aho Service Company
company:	one member or manager of the limited liability Address
<u>Name</u>	3420 Moonlight Drive, Kimberly, Idaho 83341
Joyce Stukenholtz	
. Mailing address for future correspond	ondence (annual report notices):
3420 Moonli	ight Drive, Kimberly, Idaho 83341
Future effective date of filing (opti-	onal):
ignature of an organizer(s). (An organi	izer is a member,
r is acting in behalf of a required, and existing	Secretary of State use only
r members).	C PAND
signature <u>////////////////////////////////////</u>	
yped Name: Michael W. McGre	TIDAHO SECRETARY OF ST
//	Paham IDAHO SECRETARY OF ST 11/16/2008 05 CK: MONE CT: 1117 BH: 1 1 9 38.98 = 38.89 CONVE
Signature	I LACO
Гуреd Name:	