

Signature_____
Typed Name:

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

W90117

10 JAN 26 AM 10: 2

(Instructions on back of application)

	(mstructions on pac	or application)	SECRETARY OF
. The nar	me of the limited liability co	ompany is:	STATE OF IC
		JNJ Distribution, LLC	•
. The cor	•	mailing address if diff	erent, of the initial designated
	8463 W. Hai	monica Way, Boise, Idaho	83709
	me of the commercial regis s of the non-commercial re		ame and complete street
	Jeffrey W. Greenley, 8	463 W. Harmonica Way, E	Boise, Idaho 83709
. The nar	me and address of at least	one member or mana	ager of the limited liability
compar	ny: Name		Addresa
	Jeffrey W. Greenley	8463 W. Harmor	nica Way, Boise, Idaho 83709
"			
i. Mailing	address for future correspondence	ondence (annual repo Iarmonica Way, Boise, Ida	
	C/O. 0403 VV. F	narmonica vvay, boise, iua	110 03/03
3. Future	effective date of filing (option	onal):	
	f an organizer(s). (An organi: behalf of a required, and existin		
members).	/		Secretary of State use only
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yped Nam	e: Karmelia Fredrick, Legaizo	medLC formstoard_org_fkc.PMD	
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