

Typed Name: __

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 OCT 20 AM 8: 47

1. The name of the lim	ited liability company is:	SECRETARY UT ST STATE OF IDAH
	WHYNOT GRAZIN	G, LLC
The complete street 2338 N. 2930 W., Arco	•	ne initial designated/principal office:
(Street Address)		
(Mailing Address, if different	than street address)	
3. The name and comp	olete street address of the re	egistered agent:
Harvey Walker	2338 N. 293	80 W., Arco, Idaho 83213
(Name)	(Street Addres	s)
 The name and addressing company: Name 		or manager of the limited liability
Harvey Walker		30 W., Arco, Idaho 83213
David S. Andreason		I, Howe, Idaho 83244
54110 0.741000011	1.0.000	,

5. Mailing address for f	uture correspondence (ann	ual report notices):
2338 N. 2930 W., Arco	, Idaho 83213	
6. Future effective date	of filing (optional):	
Signature of a manage person.	er, member or authorized	
		Secretary of State use only
Signature /homo	7.7 3	
Typed Name: Thomas J.	Budge, Attorney	
Signature		TRANS CEOPETARY OF CTATE

IDAHO SECRETARY OF STATE

10/20/2011 05:00

CK: 62832 CT: 1188 BH: 1295005
1 0 100.00 = 100.00 ORGAN LLC # 2