



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 OCT -1 AM 8:40

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Scodo Logistics LLC

2. The complete street and mailing addresses of the initial designated office:

130 Southpoint Boulevard
(Street Address)

Idaho Falls ID 83404
(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Scott Johnson
(Name)

2785 Eagle Drive #D101 Ammon ID 83405
(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

| Name | Address |
|----------------------|--|
| <u>Scott Johnson</u> | <u>2785 Eagle Drive D#101 Ammon ID 83405</u> |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

5. Mailing address for future correspondence (annual report notices):

2785 Eagle Drive D#101 Ammon ID 83405

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature [Signature]
Typed Name: Scott Johnson

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

10/01/2014 05:00

CK:1253 CT:301701 BH:1443503

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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