

## CERTIFICATE OF ORGANIZATION COMPANY

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	(Instructions on back	k of application)
1. T	he name of the limited liability co	mpany is:
	Sandridge Homegrown LLC	
2. T	he complete street and mailing ac 133 West 200 North, Malad City, Idaho, (Street Address) PO Box 21, Malad City, Idaho, 83252	Idresses of the initial designated office: 83252
	(Mailing Address, if different than street address)	
3. T	The name and complete street address of the registered agent:	
	Kary A Peterson	133 West 200 North, Malad City, Idaho, 83252
	(Name)	(Street Address)
	ompany: Name Kary A Peterson	Address 133 West 200 North, Malad City, Idaho, 83252
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. <b>IV</b> .	lailing address for future correspor 133 West 200 North, Malad City, Idaho, 8	•
•	133 West 200 North, Malad City, Idaho, 8	·
. Fi	133 West 200 North, Malad City, Idaho, 8 uture effective date of filing (option ature of a manager, member or	al):
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Fi gna erso gna	133 West 200 North, Malad City, Idaho, 8 uture effective date of filing (option ture of a manager, member or n.	authorized  Secretary of State use only

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