



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

12 APR -6 PM 1:35

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

LaVista Ag LLC

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

Kathy Swords, 3395 E. Windsong Drive, Boise ID 83712

(Street Address)

Kathy Swords, PO Box 7185, Boise ID 83707

(Mailing Address, if different than street address)

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

Kathleen Swords

(Name)

3395 E. Windsong Drive, Boise ID 83712

(Street Address)

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

Name

Address

Kathleen Swords

3395 E. Windsong Drive, Boise ID 83712

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

Kathy Swords, PO Box 7185, Boise ID 83707

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Kathleen Swords

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE  
04/06/2012 05:00  
CK: 729 CT: 269022 BH: 1318750  
1 @ 100.00 = 100.00 ORGAN LLC # 2  
1 @ 20.00 = 20.00 EXPEDITE C # 3

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