

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(5)	LIABILITY COM	TAIN I SO TO A
(Instruc	ctions on back of application	ZATION ZOIZOEC ZO MA 6
	ed liability company is:	150/16/18 NOVER
ROTH FAMILY MILK 5,		
	nd mailing addresses of th JEROME, IDAHO 83338	e initial designated office:
(Mailing Address, if different th	an street address)	
		mintaged
The name and comple	ete street address of the re	gistered agent:
The name and comple		- -
EVAN T. ROTH (Name) The name and address company: Name	161 5TH AVE (Street Address s of at least one member o	r manager of the limited liability Address
EVAN T. ROTH (Name) The name and address company:	161 5TH AVE (Street Address s of at least one member o	r manager of the limited liability
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EVAN T. ROTH (Name) The name and address company: Name ROTH FAMILY, LLC	161 5TH AVE (Street Address s of at least one member o	E. S, STE 310 TWIN FALLS, ID. 83303 r manager of the limited liability Address BOO EAST, JEROME, IDAHO 83338

IDAHO SECRETARY OF STATE

12/20/2012 05:00

CK: 3667 CT: 233790 BH: 1352242

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1 0 20.00 = 28.00 EXPEDITE C # 11

W 120083

Signature____

Typed Name: