

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

SECRETARY OF STAT STATE OF IDAHO

| 1. The name of the limited liabi                                 | lity company is:  |
|--|---|
|  | Petersen Equipment, LLC   |
| 2. The complete street and mai                                   | ling addresses of the initial designated/principal office:  |
| •  | 2359 Jeremy Lane  |
| (Street Address)   | Twin Falls, ID 83301  |
| (Mailing Address, if different than street a                     |   |
| 3. The name and complete stre                                    | et address of the registered agent:   |
| Kaylan Petersen  | 2359 Jeremy Lane, Twin Falls, ID 83301  |
| (Name)   | (Street Address)  |
| The name and address of at company:     Name     Kaylan Petersen | least one member or manager of the limited liability  Address  2359 Jeremy Lane, Twin Falls, ID 83301   |
| Jerėmy Petersen  | 687 Sunshine Dr., Twin Falls  |
|  |   |
|  |   |
|  |   |
| 5. Mailing address for future con                                | rrespondence (annual report notices):   |
| 235  | 69 Jeremy Lane, Twin Falls, ID 83301  |
| 6. Future effective date of filing                               | (antional):   |
| o. Future enective date of ming                                  | (optional).   |
| Signature of organizer(s). (An organ                             |   |
| acting in behalf of a member or member                           | Secretary of State use only   |
| Signature Mayle 1  | III DANK  |
| Typed Name Kaylan Pe   | ONLOG DE LOG DE |
|  | IDAHO SECRETARY OF STATE  |
| Signature  | CK: 6982 CT: 231989 BH: 1147824   |
| Typed Name: Jeremy Peters  | 1 6 100 00 - 100 00 OWN TTE 8   |

W79648