

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2013 MAY -2 AM 8: 56

(Instructions on back of application)

1. The name of the limited lia	ability company is:	SECRETARY OF STAT STATE OF IDAHO	
Raw Supply, LLC			
The complete street and m 1480 Mound Ave Idaho Falls,		designated office:	
(Street Address)			
(Mailing Address, if different than stre	et address)		
The name and complete st	treet address of the registered	d agent:	
Kassandra Groll	1480 Mound Ave Idah	o Falls, ID 83402	
(Name)	(Street Address)	(Street Address)	
4. The name and address of a company: Name	at least one member or mana	•	
Kassandra Groll	1480 Mound Ave Idah	Address o Falls, ID 83402	
Jacob Groll	1480 Mound Ave Idah	o Falis, ID 83402	
	,,,,		
5. Mailing address for future o	correspondence (appual repoi	t notices):	
1480 Mound Ave Idaho Falls, I	•	t Hottocs).	
,			
Future effective date of filing	g (optional):		
signature of a manager, me	mber or authorized		
erson.	1	Secretary of State use only	
ignature <u>Kassandia</u>	y Gron		
yped Name: Kassandra Groll			
11111		TRAUR PERFETANG OF ATATA	
signature /////////	<u></u>	IDAHO SECRETARY OF STATE 05/02/2013 05:00	
yped Name: Jacon Groll		CK: 1072 CT: 282661 BH: 1372171	