



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE
08 NOV 25 AM 11:27

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

B,A,P, LLC

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

3863N 2445E Filer Idaho 83328

(Street Address)

(Mailing Address, if different than street address)

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

Gary Perron

3863N 2445E Filer Idaho 83328

(Name)

(Street Address)

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

Name

Address

Gary Perron

3863N 2445E Filer Idaho 83328

Dan Beakers
Hai T. Anderson

324 Eastridge Dr Kimberly ID 83411
2142 So. 2450 East Motta, Idaho
83342

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

3863N 2445E Filer Idaho 83328

6. Future effective date of filing (optional): _____

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name: Gary Perron

Signature

Typed Name:

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
11/25/2008 05:00
CK: 173517 CT: 172899 BH: 1145987
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