



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2012 AUG -8 AM 8:05

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Shawn's Trucking ~~LLC~~ LLC

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

1553 Shoestring RD Gooding Id 83330

(Street Address)

(Mailing Address, if different than street address)

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

Shawn Aguado

(Name)

1553 Shoestring RD Gooding Id 83330

(Street Address)

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

Name

Address

Shawn Aguado

1553 Shoestring RD Gooding Id 83330

Wendy Wheeler

same as above

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

Same As Above

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

Signature of a manager, member or authorized person.

Signature

Typed Name:

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
08/08/2012 05:00
CK: 1225 CT: 273074 BH: 1335100
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W116239