



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

08 AUG 25 AM 8:45

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:

Battle Ridge Custom Cutting LLC

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

1100 Battle Ridge Rd, Kooskia, ID 83539

(Street Address)

(Mailing Address, if different than street address)

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

Larry A Squires

(Name)

1100 Battle Ridge Rd, Kooskia, ID 83539

(Street Address)

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

Name

Address

Larry A Squires

1100 Battle Ridge Rd, Kooskia, ID 83539

Carrie Squires

1100 Battle Ridge Rd, Kooskia, ID 83539

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

1100 Battle Ridge Rd, Kooskia, ID 83539

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 Larry A Squires

Typed Name: Larry A Squires

Signature _____

Typed Name: _____

Secretary of State use only

W77147

IDAHO SECRETARY OF STATE
08/25/2008 05:00
CK: 588 CT: 229189 BH: 1132918
1 @ 188.00 = 188.00 ORGAN LLC # 2

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Revised 07/2008