

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY 11 050 16 AM 8:39

(Instructions on back of application)

The name of the limited liability co	ompany is:  STATE OF IDEAD
LaN	Mar Cockrell & Sons LLC
The complete street and mailing a	ddresses of the initial designated office:
237 Lemhi Road, Salmon, Idaho 83467	
(Street Address)	
(Mailing Address, if different than street address)	
The name and complete street add	dress of the registered agent:
Mona Cockrell	237 Lemhi Road, Salmon, Idaho 83467
(Name)	(Street Address)
The name and address of at least	one member or manager of the limited liability
company:	
<u>Name</u>	Address
LaMar Cockrell	237 Lemhi Road, Salmon, Idaho 83467
Mona Cockrell	237 Lemhi Road, Salmon, Idaho 83467
Thomas Cockrell	237 Lemhi Road, Salmon, Idaho 83467
Orie J. Cockrell	237 Lemhi Road, Salmon, Idaho 83467
	<u> </u>
Mailing address for future correspo	andanaa (annual rapart nationa):
Mailing address for future correspo	oridence (annual report notices).
237 Lemhi Road, Salmon, Idaho 83467	
	onal):
Future effective date of filing (optic	onal):

Typed Name: Steven R. Parry, Organizer

Signature\_ Typed Name: