	LIABILITY C	OMPANY	09 AUG 25 AM 10: 03
(Instruc	(Instructions on back of application)		SECRETARY OF STATE
1. The name of the limit	ed liability company i	is:	STATE OF IDAHO
	Grassfedhighco		
2. The complete street a principal office:	ddress, and mailing a	ddress if differer	nt, of the initial designated/
205	09 Upper Reynolds Creek	Road, Murphy, Idal	ho 83650
3. The name of the com address of the non-co			and complete street
Tom Hook, 20509 Up	per Reynolds Creek Road	d, Murphy, Idaho 83	650 (County of Owyhee)
<u>Name</u> Tom Hool	<u>(</u> 20509		ddress eek Road, Murphy, idaho 83650
	<u> </u>		
5. Mailing address for fu		•	•
-	20509 Upper Reynolds Cn of filing (optional): S). (An organizer is a mer	eek Road, Murphy, j	Idaho 836 <b>SO</b>
c/o: 2 6. Future effective date of Signature of an organizer(	20509 Upper Reynolds Cn of filing (optional): S). (An organizer is a mer	eek Road, Murphy, j	Idaho 836 SO

FILED EFFECTIVE