251

FILED EFFECTIVE

CERTIFICATE OF LIMITED LIABILI	
(Instructions on back of application)	
1. The name of the limited liability company is:	
Heritage Farms, LLC	
2. The complete street and mailing ac 119 Harrison, American Falls, ID 8321 (Street Address) P. O. Box 10, American Falls, ID 83211 (Malling Address, If different than street address)	
3. The name and complete street add	ress of the registered agent:
Braden Driscoll (Name)	119 Harrison, American Falls, ID 83211 (Street Address)
The name and address of at least one member or manager of the limited liability company: Name Address	
Braden Driscoll	Address 119 Harrison, American Falls, ID 83211
5. Mailing address for future correspondence (annual report notices): P. O. Box 10, American Falls, ID 83211 6. Future effective date of filing (optional):	
Signature of a manager, member or person.	
was it his	Secretary of State use only
Signature ////////////////////////////////////	
Signature	
Typed Name:	IDAHO SECRETARY OF STATE

9/21/2012

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CK: 20977 CT: 1853 BH: 1360322 1 9 190.00 = 100.00 ORGAN LLC # 3