



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2014 JAN -3 PM 1:53

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

JFS, LLC

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

1004 Golden Ave., Fruitland ID 83619

(Street Address)

PO Box 981 Payette ID 83661

(Mailing Address, if different than street address)

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

Christi Garman

(Name)

1004 Golden Ave, Fruitland, ID 83619

(Street Address)

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

**Name**

**Address**

Johnston Family Trust

PO Box 981, Payette, ID 83661

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

PO Box 981, Payette, ID 83661

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

*Gary Johnston, Trustee*

Typed Name: Gary Johnston, Trustee

Signature

Typed Name:

Secretary of State use only

W182770

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01/03/2014 05:00  
CK: CASH CT: 264690 BH: 1404261  
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