

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2012 JUL 17 PM 4: 30

1.	The name of	the limited	liability company	is:
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Signature_____

Typed Name: _____

SECRETARY OF STATE STATE OF IDAHO

IDAHO	CATTLE FEEDERS, LLC			
2. The complete street and mailing at 109 North Arthur, Suite 400, Pocatello,	ddresses of the initial designated office:			
(Street Address)				
(Mailing Address, if different than street address)				
3. The name and complete street add	name and complete street address of the registered agent:			
Dave Bagley (Name)	201 East Center Street, Pocatello, Idaho 83201 (Street Address)			
The name and address of at least company:	one member or manager of the limited liability			
<u>Name</u>	<u>Address</u>			
Credit Shelter Trust established under	109 North Arthur, Suite 400, Pocatello, Idaho 83204			
Tom Anderson's will dated 3.22.2012				
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5. Mailing address for future correspond	ondence (annual report notices):			
109 North Arthur, Suite 400, Pocatello,	·			
6. Future effective date of filing (option	onal):			
Signature of a manager, member of person.	or authorized			
person.	Secretary of State use only			
Signature Constant	Ren			
Typed Name: Conrad J. Aiken, authorized	person			
	IDANO SECRETARY OF STATE_			

97/17/2012 05:00 CK: 4553 CT: 169988 BH: 1332396 1 9 100.00 = 100.08 ORGAN LLC # 2

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