



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

10 FEB 19 AM 9: 21

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability company is	s: SIAIE OF	IDAHO
	Hadden Tr	ucking LLC	
2.	The complete street and mailing addresses	of the initial designated/principa	I office:
	212 east 620 north Shoshone, ID 83352		
	(Street Address) P.O. BOX 1033 Sh	noshone. ID 83352	
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
-	Brooker w Hadden	212 E 620 N Shoshone, ID 83352	
	(Name) (Street	Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name Address		
	Brooker w Hadden	P.O. Box 1033 Shoshone, ID 83352	
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			e di
5.	Mailing address for future correspondence (annual report notices):		•
	P.O. Box 1033 Sh	oshone, ID 83352	·
6	Estura offective data of filing (autienal).	March 1, 2010	± 1 ± 1 ± 1 ± 1 ± 1 ± 1 ± 1 ± 1 ± 1 ± 1
Ο.	Future effective date of filing (optional):	maiori i, zo io	
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_	ng in behalf of a paember or members).		
		Secretary of State use	only
_	nature /// ///	_ 발	
Тур	ped Name: Brooker w Hadden	- CK: 1946 CT: 24 - CK: 1946 CT: 24 - CK: 1946 CT: 24 - CK: 1948 CT: 24 - CK: 1948 CT: 24 - CK: 1948 CT: 24 - 1 9 100.00 = 10	
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