

261



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$100.00 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2018 MAR 30 PM 12: 43

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Eagle Eye Twin Falls Operations, LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC.)

2. The complete street and mailing addresses of the principal office is:

4050 E. Lincoln Road, Idaho Falls, Idaho 83401

(Street Address)

P.O. Box 460, Iona, Idaho 83427

(Mailing Address, if different)

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

Newman Giles

4050 E. Lincoln Road, Idaho Falls, Idaho 83401

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

Eagle Eye Produce, Inc.

P.O. Box 460, Iona, Idaho 83427

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

P.O. Box 460, Iona, Idaho 83427

(Address)

Signature of organizer(s).

Printed Name: Newman Giles, President

Signature: 

Printed Name: _____

Signature: _____

Rev. 01/2018

Secretary of State use only

IDAHO SECRETARY OF STATE

03/30/2018 05:00

CK:17230004 CT:172039 BH:1635573

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