

Typed Name:

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIARII ITY CONT.

08 JUL 14 AH 6:50

(Instructions on back of application)

	The name of the limited liability comp	pany is: STATE OF IDAHO
	Action	n AG Transport, LLC
•	The complete street address, and ma principal office:	ailing address if different, of the initial designated/
	5202 East Ustick Road, Caldwell	II, ID 83605 - P.O. Box 487, Caldwell, ID 83606
•	The name of the commercial register address of the non-commercial regist	red agent; or the name and complete street tered agent:
	Action AG. LLC. 5617 Fast C	Cleveland Bivd., Bldg #3, Caldwell, ID 83605
	, , , , , , , , , , , , , , , , , , , ,	
•	company:	ne member or manager of the limited liability
	<u>Name</u>	Address
	Tom Floyd	10726 Lincoln Rd., Caldwell, ID 83605
	:	
	•	
5 .	Mailing address for future correspond	dence (annual report notices):
	P.O. Box	487, Caldwell, ID 83608
i.	Future effective date of filing (optional	al):
	nature of an organizer(s). (An organizer	
	acting in behalf of a required, and existing, in nembers).	initial member Secretary of State use only
11	ichilucia).	The Part of the Pa
ig	nature	5
уŗ	ped Name:Tom Floya	
in	nature	IDAHO SECRETARY OF STATE 97/15/2008 05:00 CK: 2195 CT: 194113 BH: 11276

1 0 100,00 = 100.00 ORGAN LLC # 2

W75996