



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 AUG -2 AM 9:01

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Snake River Spice Company, LLC

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

1760 S Boulevard / Idaho Falls, ID 83402

(Street Address)

(Mailing Address, if different than street address)

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

Michael E Weed

(Name)

1760 S Boulevard / Idaho Falls, ID 83402

(Street Address)

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

Name	Address
<u>Michael E Weed</u>	<u>1760 S Boulevard / Idaho Falls, ID 83402</u>
<u>April S Weed</u>	<u>1760 S Boulevard / Idaho Falls, ID 83402</u>

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

1760 S Boulevard / Idaho Falls, ID 83402

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Secretary of State use only

Signature

Typed Name: Michael E Weed

Signature

Typed Name: April S Weed

IDAHO SECRETARY OF STATE
08/02/2013 05:00
CK: 1934 CT: 205990 BH: 1304505
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