

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2013 JUN -7 PM 1:39

(Instructions on back of application)

SECRETARY OF STATE

The name of the limited liability company is:	STATE OF IDAHO
BUFFALO CLOVER, LLC	
The complete street and mailing addresses of the initial designa 214 Logan Ranch Road (Street Address)	ted office:
Georgetown, TX, 78628	
(Mailing Address, if different than street address)	
3. The name and complete street address of the registered agent:	
Corporation Service Company 12550 W. Explorer Drive, Suite	100, Boise, ID 83713
(Street Address)	•
4. The name and address of at least one member or manager of the company:	e limited liability
Name Address	
JL PARKER 214 LOGAN RANCH ROAD GE	ORGETOWN TX 78628
LISA PARKER 214 LOGAN RANCH ROAD GE	ORGETOWN TX 78628
E Mailing address for 5 t	
 initialing address for future correspondence (annual report notices)) :
 Mailing address for future correspondence (annual report notices 214 LOGAN RANCH ROAD, GEORGETOWN, TX, 78628) :
Mailing address for future correspondence (annual report notices):
214 LOGAN RANCH ROAD, GEORGETOWN, TX, 78628 6. Future effective date of filing (optional): Signature of a manager, member or authorized):
214 LOGAN RANCH ROAD, GEORGETOWN, TX, 78628 6. Future effective date of filing (optional): Signature of a manager, member or authorized person. Corporation Service Company, Organizer Secret	ary of State use only
214 LOGAN RANCH ROAD, GEORGETOWN, TX, 78628 6. Future effective date of filing (optional): Signature of a manager, member or authorized person. Corporation Service Company, Organizer	
214 LOGAN RANCH ROAD, GEORGETOWN, TX, 78628 6. Future effective date of filing (optional): Signature of a manager, member or authorized person. Corporation Service Company, Organizer Signature By: Secret Typed Name: Barbara Perry Title: Assistant Secretary	ary of State use only
214 LOGAN RANCH ROAD, GEORGETOWN, TX, 78628 6. Future effective date of filing (optional): Signature of a manager, member or authorized person. Corporation Service Company, Organizer Signature By: Typed Name: Barbara Perry Title: Assistant Secretary	

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