



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 MAY 19 AM 9:50

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Bear Lake Drug, LLC

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

836 Washington Street, Montpelier, ID 83254

(Street Address)

(Mailing Address, if different than street address)

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

Casey C. Humpherys

(Name)

836 Washington Street, Montpelier, ID 83254

(Street Address)

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

Name

Address

Dean A. Wallentine

495 N. Main, Box 4, Paris, ID 83201

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

836 Washington Street, Montpelier, ID 83254

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Dean A. Wallentine

Typed Name: Dean A. Wallentine

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

05/19/2014 05:00

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