## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

7017 MAY 20

<b>27 29</b> 37		ALITI COMPANI	403 HAT 30 PM 3:59
	(Instructions or	back of application)	SECRETARY OF STATE STATE OF IDAHO
1. The n	ame of the limited liabili	ty company is:	STATE OF IDAHO"
WDS	Farm Equipment, LLC		
2050	Omplete street and maili N. Haroldsen Dr. Address)	ng addresses of the initial o	lesignated office:
Ìdaho	Falls, ID 83401 Address, if different than street add		
		t address of the registered	agent:
Hal B	ennett	2050 N. Haroldsen Dr., Idaho Falls, ID 83401	
(Name)		(Street Address)	
compa	ame and address of at leading:  Name  Tuff D. Smith	ast one member or manag 2050 N. Haroldsen Dr.,	Address
·			
<u></u>			
5. Mailing <u>52m</u>		spondence (annual report	notices):
3. Future	effective date of filing (o	ptional):	
ignature erson.	of a manager, membe	r or authorized	
ignature <u>U</u>	e: Woodruff D. Sinith	My	Secretary of State use only
	e:	l l	IDAHO SECRETARY OF STATE 05/30/2013 05:06 CK: 1420026 CT: 172099 BH: 1376 1 0 100.00 = 100.00 ORGAN LLC H

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