

FILED EFFECTIVE

251



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 OCT -1 PM 2:55

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

TRIPLE H HAULIN, LLC

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

145 NORTH 5TH EAST, Saint Anthony ID 83445

(Street Address)

(Mailing Address, if different than street address)

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

KAROLYN HODGE

(Name)

145 NORTH 5TH EAST Saint Anthony, ID 83445

(Street Address)

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

NameAddress

KAROLYN HODGE

145 NORTH 5TH EAST, Saint Anthony, ID 83445

TERRY C. HODGE

145 NORTH 5TH EAST, Saint Anthony, ID 83445

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

145 NORTH 5TH EAST, Saint Anthony, ID 83445

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

Typed Name: JASON R. RAMMELL, ATTORNEY

Signature

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

10/01/2014 05:00

CK:2260520 CT:172099 BH:1443590

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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