FILED EFFECTIVE

· 25<u>1</u>

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY PER 21 Mill: 15	
(Instructions on back of application) SECRETARY CONSTATE 1. The name of the limited liability company is:	
1. The name of the limited liability company is: TNT Agriculture, LLC	
2. The complete street and mail 1287 Charlynn Way, Blackfor (Street Address) PO Box, 1342, Blackfoot, ID (Mailing Address, if different than street ac	
•	et address of the registered agent:
John Taberna (Name)	1287 Charlynn Way, Blackfoot, ID 83221 (Street Address)
The name and address of at I company:	east one member or manager of the limited liability
Name	Address
<u> Iohn Taberna</u> Karolyn R. Taberna	PO Box 1342, Blackfoot, ID 83221 PO Box 1342, Blackfoot, ID 83221
5. Mailing address for future correspondence (annual report notices):	
PO Box 1342, Blackfoot, ID 83221	
6. Future effective date of filing (optional):	
Signature of a manager, member or authorized person.	
Signature Typed Name: John Taberna	Secretary of State use only
Signature Karolyn R. Taben	IDAHO SECRETARY OF STATE Date