

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 FEB -4 AM 8: 38

SECRETARY OF STATE STATE OF IDAHO

1. The name of the limited liability com	npany is: STATE OF IDAM	,
Palouse Pra	rairie Wholesome Grains LLC	
2. The complete street and mailing add	dresses of the initial designated/principal office:	
1001 Com	npton Ct., Moscow, ID 83843	_
(Street Address)		
(Mailing Address, if different than street address)		•
. The name and complete street address	ress of the registered agent:	
Jake B Hill	1001 Compton Ct., Moscow, ID 83843	4 Å •
(Name)	(Street Address)	
. The name and address of at least or company:	ne member or manager of the limited liability	
Name	Address	
Jake B Hill	1001 Compton Ct., Moscow, ID 83843	•
	:	
		• ja 194
. Mailing address for future correspon	ndence (annual report notices):	•
PO Box	8477, Moscow, ID 83843	•
. Future effective date of filing (option	nal):	•
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gnature of organizer(s), (An organizer is a	a member, or is	, :
ting in behalf of a member or members).	Secretary of State use only	
gnature //llu //s	C PMO	
/ped Name: Jake B Hill		
	Market No.	
ignature	IDAHO SECRETARY OF S ### ### ### #######################	TATE 5 = 0
yped Name:	CK: 3975 CT: 62585 BH:	12965
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