



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 JAN -6 AM 9:42

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

MVP Works LLC

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

1820 WALNUT AVE, FRUITLAND, IDAHO 83619

(Street Address)

(Mailing Address, if different than street address)

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

SHELLY NATTRESS

(Name)

1820 WALNUT AVE, FRUITLAND, IDAHO 83619

(Street Address)

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

Name

Address

SHELLY NATTRESS

1820 WALNUT AVE, FRUITLAND, IDAHO 83619

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

1820 WALNUT AVE, FRUITLAND, IDAHO 83619

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Shelly Nattress
Typed Name: Shelly Nattress

Signature _____
Typed Name: _____

Secretary of State use only

W132841

IDAHO SECRETARY OF STATE
01/06/2014 05:00
CK: 457 CT: 291338 BH: 1404455
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