

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

09 APR 27 PH 3: 35

SECRETARY OF STATE STATE OF IDAHO

W83485

i. The name of the limited liability compa	ally 15.
Ag West	Dairy Services, LLC
The complete street and mailing addre	esses of the initial designated/principal office:
5114 Homestea	id Rd., Homedale, ID 83628
(Street Address)	
(Mailing Address, if different than street address)	
The name and complete street addres	s of the registered agent:
Phillip Lootens	5114 Homestead Rd., Homedale, ID 83628
(Name)	(Street Address)
company: Name Phillip Lootens	Address 5114 Homestead Rd., Homedale, ID 83628
Phillip Lootens	5114 Homestead Rd., Homedale, ID 83628
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	and the second s
Mailing address for future corresponde	ance (annual report notices):
-	ad Rd., Homedale, ID 83628
Future effective date of filing (optional)):
gnature of organizer(s). (An organizer is a m	ember, or is
ing in behalf of a member or members).	Secretary of State use only
gnature WWL	CM CM CM CM CM CM CM CM
ped Name: James W. Colborn, Organiz	eer g
<u> </u>	88
gnature	IBANO SECRETARY OF STATE
rped Name:	1 0 198.00 = 186.68 (DOCAN LL)