

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 NOV 14 AM 8:50

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Taylor Harvests, LLC

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

3960 N. 2405 E Filer, ID 83328

(Street Address)

(Mailing Address, if different than street address)

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

Jeni Taylor
(Name)3960 N 2405 E Filer ID 83328
(Street Address)

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

Name	Address
<u>Dustin M. Taylor</u>	<u>3960 N. 2405 E. Filer, ID 83328</u>
<u>Earl Taylor</u>	<u>419 Meadows Ln. Twin Falls ID 83301</u>
<u>Jeni Taylor</u>	<u>3960 N. 2405 E. Filer, ID 83328</u>

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

3960 N. 2405 E. Filer, ID 83328

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name:

Signature

Typed Name:

Secretary of State use only

 IDAHO SECRETARY OF STATE
 11/14/2012 05:00
 CK: 5863 CT: 276237 BH: 1347562
 1 @ 100.00 = 100.00 ORGAN LLC # 2

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