

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 10 SEP -9 AM 8: 34

VE T	(Instructions on back of applic	secretary OF STATE	
1.	The name of the limited liability company is:	s: STATE OF IDAHO	
	LDE Enterprises, LLC		
2.	2. The complete street and mailing addresses of the initial designated/principal office:		
	510 Nevada Street; Gooding ID 8 (Street Address)	83330 83330	
	PO Box 333; Gooding ID 83330 (Mailing Address, if different than street address)		
3.	3. The name and complete street address of the registered agent:		
	Larry D. Edwards 510 (Name) (Street Add	Nevada Street; Gooding ID 83330	
4.	. The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>	Address	
	Larry D. Edwards PO Box	x 333; Gooding ID 83330	
5. A	failing address for future some and		
5. Mailing address for future correspondence (annual report notices):			
	PO Box 333; Gooding ID 83330		
6. F	uture effective date of filing (optional):	· · · · · · · · · · · · · · · · · · ·	
Signa acting	ature of organizer(s). (An organizer is a member, or in behalf of a member or members).		
Signa	iture Jon D. Charle	Secretary of State use only	
Гурес	Name: Larry D. Edwards	IDAHO SECRETARY OF STATE 109/09/2010 05:00 CK: 985 CT: 22543 BH: 1238207 1 0 100.00 = 100.00 ORGAN LLC N 2	
Signa	ture	IDAHO SECRETARY OF STATE 99/09/2010 05:00	
Гурес	Name:	CK: 985 CT: 22543 BH: 1238287	