

**FILED EFFECTIVE**

251

JUN 26 PM 2:26


**CERTIFICATE OF ORGANIZATION  
LIMITED LIABILITY COMPANY**

 SECRETARY OF STATE  
STATE OF IDAHO

(Instructions on back of application)

1. The name of the limited liability company is:

Portion Control Fresh, LLC

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

1070 Riverwalk Drive, Suite 200, Idaho Falls 83402

(Street Address)

(Mailing Address, if different than street address)

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

Sam Cook

(Name)

1070 Riverwalk Drive, Suite 200, Idaho Falls 83402

(Street Address)

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

**Name****Address**
Lorin V. Walker
1070 Riverwalk Drive, Suite 200, Idaho Falls 83402
Keith T. Walker
1070 Riverwalk Drive, Suite 200, Idaho Falls 83402

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

1070 Riverwalk Drive, Suite 200, Idaho Falls 83402

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

 Typed Name: Lorin V. Walker

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

06/26/2014 05:00

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