

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 SEP 27 AM 8 27

. The name of the limited liability	y company is:	SECRETARY OF S
Midwest Royalty and Expl	oration, LLC	STATE OF IDA
The complete street and mailing		nitial designated/principal office:
416 River Street, Wallac		
(Street Address)		
P.O. Box 709, Wallace, I (Mailing Address, if different than street ad	dress)	
3. The name and complete stree	t address of the regis	tered agent:
Michael K. Branstetter (Name)	416 River S (Street Address)	treet, Wallace, ID 83873
The name and address of at company:	east one member or i	manager of the limited liability
Name		<u>Address</u>
Michael K. Branstetter	416 River	Street, Wallace, ID 83873
		•
5. Mailing address for future co	rrespondence (annua	Il report notices):
P.O. Box 709, Wallace,	ID 83873	
6. Future effective date of filing	ı (optional):	
Signature of a manager, mer	nber or authorized	
person.	1	
$h: \mathcal{A}$	1/2	Secretary of State use only
Signature / / Juhan T	Krant	
Typed Name: Michael K. Br.	anstetter	
		IDAHO SECRETARY OF STATE
Signature		09/27/2016 03:00 CV: 53219 CT: 4971 BH: 1240556
Typed Name:		1 @ 166.88 = 166.86 ORGAN LLC # 2
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