



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

12 JAN -5 AM 9:25

1. The name of the limited liability company is:

Broken Horn Brewing Company LLC.

SECRETARY OF STATE
STATE OF IDAHO2. The complete street and mailing addresses of the initial designated office:

40 Elk Haven Lane, Lake Fork ID 83638

(Street Address)

P.O. Box 1674, McCall ID 83638

(Mailing Address, if different than street address)

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

Kalen Dodge

(Name)

970 Ridge Road, McCall ID 83638

(Street Address)

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

Kalen Dodge

P.O. Box 1674, McCall ID 83638

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

P.O. Box 1674, McCall ID 83638

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

Signature of a manager, member or authorized person.

Secretary of State use only

Signature _____

Typed Name: Kalen Dodge

Signature _____

Typed Name: _____

IDaho SECRETARY OF STATE
 01/05/2012 05:00
 CK: 1821 CT: 265613 BH: 1304567
 1 @ 100.00 = 100.00 ORGAN LLC # 2
 1 @ 20.00 = 20.00 EXPEDITE C # 3