

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 10 FEB -2 AM 8: 84

(Instructions on back of application)

SECRETARY OF STATE

| 1. The name of the limited liabilit | y company is: STATE OF IDAHO |
|--|---|
| | Hecho En Mexico LLC |
| • | ng addresses of the initial designated/principal office: |
| | t Bridge Suite K, Blackfoot, Idaho 83221 |
| (Street Address) | |
| (Mailing Address, if different than street add | ress) |
| 3. The name and complete street | address of the registered agent: |
| Kristi Linares | 1010 West Bridge Suite K, Blackfoot, Idaho 83221 |
| (Name) | (Street Address) |
| The name and address of at le company: | ast one member or manager of the limited liability |
| <u>Name</u> | Address |
| Krisit Linares | 227 East 350 North, Blackfoot, Idaho 83221 |
| Cherryl Dahlquist | 346 North 700 West, Blackfoot, Idaho 83221 |
| Tami Parris | 7052 Running Iron Lane, Pocatello, Idaho 83204 |
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| 5. Mailing address for future corre | espondence (annual report notices): |
| 1010 Wes | t Bridge Suite K, Blackfoot, Idaho 83221 |
| 6. Future effective date of filing (d | ontional): |
| o. I dialo chodivo dato or hing (c | |
| Signature of organizer(s). (An organizating in behalf of a member or members | |
| acting in behalf of a member of members | Secretary of State use only |
| Signature Sunt Singu | PM 19 |
| Typed Name Kristi Lina | Tes IDAHO SECRETARY OF STATE ### ### ### ### ### #### ########### |
| | IDAHO SECRETARY OF STATE |
| Signature | O2/02/2010 95:000 CK: 4119 CT: 227097 BH: 1206298 |
| Typed Name: | |

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