



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2014 MAY 19 AM 9:14

 SECRETARY OF STATE
 STATE OF IDAHO

1. The name of the limited liability company is:

PLUID FAMILY FARMS, LLC

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

1264 BLUE SKY ROAD, BONNERS FERRY, ID 83805

(Street Address)

(Mailing Address, if different than street address)

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

JUSTIN PLUID

(Name)

1264 BLUE SKY ROAD, BONNERS FERRY, ID 83805

(Street Address)

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

Name
Address

JUSTIN PLUID

1264 BLUE SKY ROAD, BONNERS FERRY, ID 83805

SHANNON PLUID

1264 BLUE SKY ROAD, BONNERS FERRY, ID 83805

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

1264 BLUE SKY ROAD, BONNERS FERRY, ID 83805

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: JUSTIN PLUID

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

05/19/2014 05:00

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