FILED EFFECTIVE

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CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2015 JUN 19 PM 2: 01

| | | SILITT CUMPAN | SECHETARY OF STATE | |
|------------------------|---|------------------------------------|---|--|
| 8 H 900 | (instructions of | n back of application) | STATE OF IDAHO | |
| 1. The nan | he name of the limited liability company is: | | | |
| Gardner | Family Holdings, LLC | | | |
| | nplete street and maili th 150 West Blackfoot, ID, | ng addresses of the initi 83221 | al designated office: | |
| (Street Ad | dress) | | | |
| A gnilisM) | ddress, if different than street ad | dress) | | |
| 3. The nam | ne and complete stree | et address of the register | red agent: | |
| Lance G | ardner | 589 North 150 Wes | et Blackfoot, ID, 83221 | |
| (Name) | | (Street Address) | | |
| 4. The nan compan | | east one member or ma | nager of the limited liability | |
| Lance G | | 589 North 150 Wes | 589 North 150 West Blackfoot, ID, 83221 | |
| | | | | |
| ~ | address for future con th 150 West Blackfoot, ID, | respondence (annual re , 83221 | port notices): | |
| | | | | |
| 6. Future e | effective date of filing (| optional): | | |
| Signature o person. | of a manager, memb | er or authorized | | |
| • | | | Secretary of State use only | |
| Signature | Lance Hardy | ur | | |
| yped Name | Eance Gardner, Manage | ger | IDAHO SECRETARY OF STAT 06/19/2015 05:00 | |
| | | | CK: PREPAID CT: 113824 BH: 1 | |
| Signature | | | 10 100.00 = 100.00 ORGAN | |
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