

251



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

FEB 14 AM 9:24
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Alkali Flats, LLC

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

119 Harrison, American Falls, ID 83211

(Street Address)

P. O. Box 10, American Falls, ID 83211

(Mailing Address, if different than street address)

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

Braden Driscoll

(Name)

119 Harrison, American Falls, ID 83211

(Street Address)

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

Name

Address

Braden Driscoll

119 Harrison, American Falls, ID 83211

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

P. O. Box 10, American Falls, ID 83211

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Brock Driscoll, Member

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

02/14/2013 05:00

CK: 20977 CT: 1853 BH: 1360322

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