



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

12 JAN 18 PM 1:03

1. The name of the limited liability company is:

Jones Distribution LLC

SECRETARY OF STATE
STATE OF IDAHO

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

1801 Conant Ave Burley ID 83318

(Street Address)

(Mailing Address, if different than street address)

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

Shiloh Jones
~~Shiloh Jones~~

(Name)

1801 Conant Ave Burley ID 83318

(Street Address)

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

Name

Address

Shiloh Jones

1801 Conant Ave, Burley ID 83318

Mark Jones

1801 Conant Ave Burley ID 83318

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

1801 Conant Ave Burley ID 83318

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

Signature of a manager, member or authorized person.

Signature

Shiloh Jones

Typed Name:

Shiloh Jones

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
01/18/2012 05:00
CK: 202 CT: 266063 BH: 1386678
1 @ 100.00 = 100.00 ORGAN LLC # 2

W110216