

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 MAY 13 AM 8: 43

SECRETARY OF STATE
STATE OF IDAHO

. The name of the limited liability	y company is:	STATE OF IDAMO	
	WGF INDUSTRIES, LLC	<u> </u>	
. The complete street and mailin	g addresses of the ini	tial designated/principal office:	
325 NW	/ Bonneville Dr. Idaho Falls	s, ID 83401	
(Street Address)			
(Mailing Address, if different than street add	ress)		
. The name and complete street	address of the registe	ered agent:	
Aramis Pugh	<u>.                                    </u>	neville DR Idaho Falls, ID 83401	
(Name)	(Street Address)		
The name and address of at le	ast one member or ma	anager of the limited liability	
Name		Address	
Aramis Pugh	325 NW Bor	neville DR Idaho Falls, ID 83401	
		with the state of	
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Mailing address for future corre	enondence (annual re	unort notices):	
•	/ Bonneville DR Idaho Falls	•	
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Future effective date of filing (optional):			
nature of organizer(s). (An organiz	er js a member, or is		
ng in behalf of a member or members)	/	Secretary of State use only	
notura / MALINA	GW <sup>A</sup> .	Societary of State dec only	
nature Arbinis Pu	gh   s		
ped Name: Arturiis Pu	B		
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