



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 OCT 20 AM 9:44

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Blake Farms, LLC

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

345 North 7th East, Saint Anthony, Idaho 83445

(Street Address)

(Mailing Address, if different than street address)

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

Lindsey Blake

(Name)

345 North 7th East, Saint Anthony, Idaho 83445

(Street Address)

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

Name

Address

James Blake

345 North 7th East, Saint Anthony, Idaho 83445

Zenda Blake

345 North 7th East, Saint Anthony, Idaho 83445

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

345 North 7th East, Saint Anthony, Idaho 83445

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

Signature of a manager, member or authorized person.

Signature Lindsey Blake
Typed Name: Lindsey Blake

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

10/20/2014 05:00

CK:1106 CT:277498 BH:1445899

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