

FILED EFFECTIVE

2017 JUN -5 AM 10: 01

SECRETARY OF STATE
STATE OF IDAHO

Complete and submit the application in duplicate.

1. The name of the limited liability company is: W & M Yost LLC
2. The date the certificate of organization was originally filed : May 4, 2011
3. The name of the limited liability company is amended to:
4. The complete street and mailing addresses of the principal office is amended to:
- (Street Address)
- (Mailing Address, if different)
5. The mailing address for future correspondence (annual reports) is amended to:
- (Address)
6. The name and address of the managers/members shall be amended as follows:
- | | | | | | |
|------|-------------------------------------|---------|-------------------------------------|--------------------------|--|
| Add: | <input checked="" type="checkbox"/> | Delete: | <input type="checkbox"/> | <u>Travis Duane Yost</u> | <u>85 Oak Avenue, Rexburg, Idaho 834</u> |
| | | | | (Name) | (Address) |
| Add: | <input type="checkbox"/> | Delete: | <input checked="" type="checkbox"/> | <u>Melba Yost</u> | <u>Deceased</u> |
| | | | | (Name) | (Address) |
| Add: | <input type="checkbox"/> | Delete: | <input type="checkbox"/> | <u></u> | <u></u> |
| | | | | (Name) | (Address) |
7. Signature of a manager, member, or authorized person. _____

Printed Name: Scott R. Hall, Manager

Signature:

Printed Name: Travis Duane Yost, Manager

Signature:

Secretary of State use only

IDAHO SECRETARY OF STATE

06/05/2017 05:00

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