

## CERTIFICATE OF ORGANIZATION

	LIMITED LIABILITY COMPANY 2013 FEB 20 PM 1: 18
	(Instructions on back of application)
1. TI	ne name of the limited liability company is:
_	WP Logistics LLC
2. Ti	ne complete street and mailing addresses of the initial designated office:
7	527 Lake fidge Cir Nampa, ID 83686
· <del>(</del>	Mailing Address, if different than street address)
3. TI	ne name and complete street address of the registered agent:
<u> </u>	Name) Street Address)  Name)  Name  Street Address)
4. T	he name and address of at least one member or manager of the limited liability
	ompany: Name Address
_	Warne Address  [Jado Rederson 527 Lake Ridge Cir Nampa, ID 93686
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5. M	lailing address for future correspondence (annual report notices):
-	52-1 Lake fidge Cir Nampa, FD 83686
6. F	uture effective date of filing (optional):
Signa	nture of a manager, member or authorized
Signa	Secretary of State use only
-	Name: Wade Pederson
	IDAHO SECRETARY OF STATE 02/20/2013 05:00
Signa	

CK: 1292859 CT: 172099 BH: 1360995 1 @ 100.00 = 100.00 ORGAN LLC # 2

Typed Name: \_\_\_\_\_