



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2012 MAR 23 AM 10:04

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Walipini Farms LLC

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

878 Wendell Street, Twin Falls, Idaho 83301

(Street Address)

(Mailing Address, if different than street address)

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

Doris Williams

(Name)

878 Wendell Street, Twin Falls, Idaho 83301

(Street Address)

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

Name

Address

Maura Williams

878 Wendell Street, Twin Falls, Idaho 83301

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

878 Wendell Street, Twin Falls, Idaho 83301

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Maura Williams

Typed Name: Maura Williams

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
03/23/2012 05:00
CK: 2422 CT: 268455 BH: 1316513
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

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