



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

2016 JAN 25 PM 2:20

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

C & F Dream Fruition, LLC

Remember to include the words "Limited Liability Company," "Limited Company" or the abbreviations "LLC," "L.L.C." or "C.L.L.C."

2. The complete street and mailing addresses of the principal office is:

145 West Jackson Creek Rd., Inkom, Idaho 83245

(Street Address)

(Mailing Address, if different)

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

Christopher T. Foster

145 West Jackson Creek Rd., Inkom, ID 83245

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

Christopher T. Foster

145 West Jackson Creek Rd., Inkom, Id 83245

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

145 West Jackson Creek Rd., Inkom, ID 83245

(Address)

Signature of organizer(s).

Printed Name: Christopher T. Foster

Signature: Chris Foster

Printed Name: _____

Signature: _____

Secretary of State use only

IDaho SECRETARY OF STATE

01/25/2016 05:00

CK:2134 CT:307218 BH:1510314
1@ 100.00 = 100.00 ORGAN LLC #2
1@ 20.00 = 20.00 EXPEDITE C #3