

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 JUL 11 PM 4: 19

SECRETARY OF STATE

(11111111111111111111111111111111111111		STATE OF IDAHO
1. The name of the limited liability	company is:	STATE OF IDAHO
Eagle Ridge Dairy, LLC		
The complete street and mailing     4890 Dry Lake Road, Nampa, Idaho     (Street Address)	•	nitial designated office:
(Mailing Address, if different than street addr	ess)	
3. The name and complete street	address of the regis	tered agent:
Adrian Kroes	4890 Dry Lake Road, Nampa, Idaho 83686	
(Name)	(Street Address)	
The name and address of at leacompany:	ast one member or r	nanager of the limited liability
Name		Address
SunRidge Dairy, LLC	4890 Dry Lake I	Road, Nampa, Idaho 83686
<ol> <li>Mailing address for future corre</li> <li>4890 Dry Lake Road, Nampa, Idaho</li> </ol>		report notices):
6. Future effective date of filing (o	ptional):	
	<del></del>	
Signature of a manager, membe person.	r or authorized	
Cianatura // /		Secretary of State use only  IDAHO SECRETARY OF STATE
Signature Scott Tschirgi, Authorize	nd Person	07/11/2014 05:00 CK:4076 CT:248376 BH:1432 16 100.00 = 100.00 ORGAN L
Signature		_
Typed Name:		14/3 996/

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9/21/2012