

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 NOV -9 AM 8:54

SECRETARY OF C

1. The name of the limited liability company is:	STATE OF IDAHO
James Trucking Company LLC.	
2. The complete street and making addresses of the initial designated/principal office:	
103 Brome brive. (Street Address) P. D. Box 1078, Victor Ide	sho 83455
(Mailing Address, if different than street address)  3. The name and complete street address of the registered agent:	
^	
(Name) Lavet James 103 Br	rome Drive, Victor Idaho 83455
<ol> <li>The name and address of at least one member or manager of the limited liability company:</li> </ol>	
Name	<u>Address</u>
Jane James 1070	ELK RUN UNIT 48
Jackson WY 83007 for	
ma, line	P.O. BOX 13068
Jackson Wy 8300Z	
5. Mailing address for future correspondence (annual report notices):	
P.o Box 1078, Victor Idaho 83455	
6. Future effective date of filing (optional):	
Signature of a manager, member or authorized person.	
porcori.	Secretary of State use only
Signature Caust January	
Typed Name: <u>Cavet James</u>	
Signature Jane W. James	IDANO SECRETARY OF STATE 11/09/2011 @5:00 CK: 659418447 CT: 264889 BH: 1297411
TVOED NSME:	1 @ 190_00 = 100_00