



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2013 APR 25 PM 1:38

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

THREE BROTHERS DISTRIBUTION COMPANY, LLC

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

208 N THIRD STREET, PARMA ID 83660

(Street Address)

(Mailing Address, if different than street address)

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

DAVID CRAFT

(Name)

208 N THIRD STREET, PARMA ID 83660

(Street Address)

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

Name

Address

DAVID CRAFT

802 N C STREET, PARMA ID 83660

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

208 N THIRD STREET, PARMA ID 83660

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name:

David D. Craft

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
04/25/2013 05:00
CK: CASH CT: 202400 BH: 1371148
1 @ 100.00 = 100.00 ORGAN LLC # 2

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