

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANYFILED EFFECTIVE

(Instructions on back of application) 08 0CT 28 AM 8: 09

1.	The name of the limited liability com	pany is: SECRETARY OF STATE
	Blind Ea	gle Transportation, LLC
2.		resses of the initial designated/principal office:
	3114 Arrowhead	d Drive Caldwell, Idaho 83605
	(Street Address)	
	(Mailing Address, if different than street address)	
3.	The name and complete street addre	ess of the registered agent:
	Charles Annis	3114 Arrowhead Drive Caldwell, Idaho 83605
	(Name)	(Street Address)
4.	The name and address of at least or company: Name Charles Annis	Address 3114 Arrowhead Drive Caldwell, Idaho 83605
Mailing address for future correspondence (annual report notices): 3114 Arrowhead Drive Caldwell, Idaho 83605		
6.	Future effective date of filing (option	al):
•	gnature of organizer(s), (An organizer is a ing in behalf of a member or members).	
Sig	gnature Maule anin	Secretary of State use only
	ped Name: Charles Annis	
Sig	gnature	IDAHO SECRETARY OF STATE 10/28/2008 05:00 CK: 1039 CT: 230968 BH: 114199 CK: 1039 CT: 230968 PH: 114199
Ту	ped Name:	10/28/2008 05:00 CK: 1039 CT: 230960 BH: 114199

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