

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2013 SEP 18 PM 3: 24

(Instructions on back of application)

SECRETARY OF STATE

| | STATE OF IDAHO |
|--|--|
| 1. The name of the limited liability of | ompany is: |
| M. Goodson Farms, LLC | |
| The complete street and mailing a 22910 Ten Davis Road, Parma (Street Address) | addresses of the initial designated office: a, Idaho 83660 |
| (Mailing Address, if different than street address) | |
| 3. The name and complete street add | |
| Melvin G. Goodson (Name) | 22910 Ten Davis Road, Parma, Idaho 83660 (Street Address) |
| The name and address of at least company: | one member or manager of the limited liability |
| <u>Name</u> Melvin G. Goodson | Address 22010 Top Davis Boot B |
| Wanda F. Goodson | 22910 Ten Davis Road, Parma, Idaho 83660 22910 Ten Davis Road, Parma, Idaho 83660 |
| | |
| Mailing address for future correspondately 22910 Ten Davis Road, Parma, | ndence (annual report notices): , Idaho 83660 |
| Future effective date of filing (option | nai): |
| gnature of a manager, member or rson. | authorized |
| pature <u>Malui</u> <u>Joo</u> ped Name: Melvin G. Goodson, Mana | Secretary of State use only |
| nature Manda F. Goodson, Mana | IDAHO SECRETARY OF STATE 99/18/2013 05:00 |