

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 FEB 10 AM 8:23

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

WELLS LIVESTOCK, LLC

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

3948 N 800 E, Buhl, ID 83316

(Street Address)

(Mailing Address, if different than street address)

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

Walter G. Wells

(Name)

3948 N 800 E, Buhl, ID 83316

(Street Address)

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

NameAddress

Walter G. Wells

3948 N 800 E, Buhl, ID 83316

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

3948 N 800 E Buhl, Id 83316

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Walter G. Wells

Secretary of State use only

Signature _____

Typed Name: _____

IDaho SECRETARY OF STATE
02/10/2011 05:00
CK: 2442 CT: 233798 BN: 1259464
1 @ 100.00 = 100.00 ORGAN LLC # 2

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