

FILED EFFECTIVE

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 MAY 26 AM 9:27

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Family Tradition Transportation, LLC

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

23 Front ST. Kooskia ID. 83539

(Street Address)

P.O. Box 16 Kooskia ID. 83539

(Mailing Address, if different than street address)

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

Brent Lupinacci

(Name)

23 Front ST. Kooskia ID. 83539

(Street Address)

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

Name**Address**Brent Lupinacci23 Front ST Kooskia ID 83539Jessica Lupinacci23 Front ST Kooskia ID 83539Sara Elwess23 Front ST kooskia ID 83539

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

P.O. Box 16 Kooskia ID 83539

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

Signature of a manager, member or authorized person.

Signature *Brent Lupinacci*Typed Name: Brent Lupinacci

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

05/27/2015 05:00

CK:400 CT:310638 BH:1477008

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