



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

12 FEB -3 AM 9:08

1. The name of the limited liability company is:

ROBINSON WARD LAND, LLC

SECRETARY OF STATE
STATE OF IDAHO

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

406 PAGE CIRCLE BURLEY, ID 83318

(Street Address)

(Mailing Address, if different than street address)

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

DERIK J. ROBINSON

(Name)

406 PAGE CIRCLE BURLEY, ID 83318

(Street Address)

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

Name

Address

DERIK J. ROBINSON

406 PAGE CIRCLE BURLEY, ID 83318

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

406 PAGE CIRCLE BURLEY, ID 83318

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

Signature of a manager, member or authorized person.

Signature

[Handwritten Signature]

Typed Name: DERIK J. ROBINSON

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/03/2012 05:00
CK: 15711 CT: 93701 BH: 1309139
1 @ 100.00 = 100.00 ORGAN LLC # 2