



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2013 DEC 19 PM 2:09

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

OREGON DEHYDRATION & PROCESSING, LLC

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

322 E. MAIN ST. PMB 209, BURLEY, ID 83318

(Street Address)

(Mailing Address, if different than street address)

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

JEREMY ANDERSON

(Name)

74 W 100 N, RUPERT, ID 83350

(Street Address)

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

<u>Name</u>	<u>Address</u>
<u>RAW, LLC</u>	<u>322 E MAIN ST., PMB 209, BURLEY, ID 83318</u>
_____	_____
_____	_____
_____	_____
_____	_____

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

322 E MAIN ST., PMB 209, BURLEY, ID 83318

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

Signature of a manager, member or authorized person.

Signature [Handwritten Signature]

Typed Name: JEREMY ANDERSON

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
12/19/2013 05:00
CK: 1644650 CT: 172099 BH: 1402507
1 @ 100.00 = 100.00 ORGAN LLC # 4

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