

Signature:

Rev. 08/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2015 OCT 19 AM 11: 13

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

SECTIFIED LOF STATE

W157386

Complete and submit the application in <u>duplicate</u>.

1.	The name of the limited liability LEMONS TRANSPORT LLC	STATE OF TDAHO	
2.	The complete street and mailin 3980 N HAROLDSEN DR IDA	g addresses of the princip MO FALLS, ID 83401	al office is:
	and the second second		
	18 Bay Transport Control	***************************************	
3.	The name and complete street address of the registered agent:		
	DAVID D LEMONS JR	6813 S HOLMES IDAHO FALLS, ID 83404	
	V 18		
4.	The name and address of at lea		nited liability company: IDAHO FALLS, ID 83404
	g profession and the second se	D. A.	
	DAVID D LEMONS III	1638 SUNNY PINE WAY IDAHO FALLS, ID 83404	
	TYREL D LEMONS	6241 E 97 N IDAHO FALLS, ID 83401	
	रिन् र क्रिकेट		
5.	Mailing address for future correspondence (annual report notices): 3980 N HAROLDSEN DR IDAHO FALLS, ID 83401		
	5.45		
Sign	nature of organizer(s).		
	ted Name: David	emons	Secretary of State use only
Sigr	nature: Jacobs	mons	IDAHO SECRETARY OF STATE 10/19/2015 05:00
Prin	fed Name:		CK:21655 CT:159528 BH:1496691 10 100.00 = 100.00 ORGAN LLC #2 10 20.00 = 20.00 EXPEDITE C #3