



0005080821

**STATE OF IDAHO***Office of the secretary of state, Phil McGrane*
**CERTIFICATE OF ORGANIZATION LIMITED
LIABILITY COMPANY**

Idaho Secretary of State
PO Box 83720
Boise, ID 83720-0080
(208) 334-2301
Filing Fee: \$100.00

*For Office Use Only***-FILED-**

File #: 0005080821

Date Filed: 1/25/2023 12:27:32 PM

<p>Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (see descriptions below)</p> <p>1. Limited Liability Company Name Type of Limited Liability Company Entity name</p> <p>2. The complete street address of the principal office is: Principal Office Address</p> <p>3. The mailing address of the principal office is: Mailing Address</p> <p>4. Registered Agent Name and Address Registered Agent</p>		<p>Standard (filing fee \$100)</p> <p>Limited Liability Company Idaho Elite K-9 LLC</p> <p>CHRISTOPHER NORMAN 523 N 3400 LEWISVILLE, ID 83431</p> <p>CHRISTOPHER NORMAN 523 N 3400 E LEWISVILLE, ID 83431-5027</p> <p>Registered Agent Christopher J Norman Physical Address: 523 N 3400 E LEWISVILLE, ID 83431 Mailing Address: 523 N 3400 E LEWISVILLE, ID 83431-5027</p>						
<p><input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.</p> <p>5. Governors</p> <table border="1"> <tr> <th>Name</th> <th>Address</th> </tr> <tr> <td>Christopher J Norman</td> <td>523 N 3400 E LEWISVILLE, ID 83431</td> </tr> <tr> <td>Rachel K Norman</td> <td>523 N 3400 E LEWISVILLE, ID 83431</td> </tr> </table> <p>Signature of Organizer: <i>Christopher J Norman</i> Sign Here</p> <p>01/25/2023 Date</p>			Name	Address	Christopher J Norman	523 N 3400 E LEWISVILLE, ID 83431	Rachel K Norman	523 N 3400 E LEWISVILLE, ID 83431
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