



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

09 JUL 24 PM 12:38

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

K & M Interprises LLC

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

1801 Wildwood St Boise ID 83713

(Street Address)

(Mailing Address, if different than street address)

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

Bennett Akers

12730 W Scottfield St. Boise ID 83713

(Name)

(Street Address)

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

**Name**

**Address**

Bennett Akers

12730 W Scottfield St. Boise ID 83713

Craig Korell

9985 W Mesquite Ct Boise ID 83704

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

1801 Wildwood St Boise ID 83713

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature \_\_\_\_\_

Typed Name: Bennett Akers

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
07/24/2009 05:00  
CK: 286783 CT: 172899 DH: 1188153  
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Revised 07/2008

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