

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
2016 HAR 21 PM 2: 03
SECRETARY OF OTHER

1. The name of the limited liability con	The name of the limited liability company is:	
Kings Limousine & Transportation LLC		
The complete street and mailing ad     1320 N. Spokane St. #A Post Falls , ID     (Street Address)		esignated office:
(Mailing Address, if different than street address)		
. The name and complete street add	ess of the registered a	agent:
Donald R King	1320 N. Spokane St. #A Post Falls , ID 83854	
(Name)	(Street Address)	
. The name and address of at least o company:	ne member or manage	er of the limited liability
<u>Name</u>	Address	
Donald R King	1320 N. Spokane St. #A Post Falls , ID 83854	
. Mailing address for future correspon	dence (annual report :	notices):
1320 N. Spokane St. #A Post Falls , ID 8		
. Future effective date of filing (option	al):	
ignature of a manager, member or erson.	authorized	
ignature Dowk In		Secretary of State use only IDAHO SECRETARY OF STAT 03/21/2016 05:00
yped Name; Donald R King	16	143753617 CT:322058 BF 100.00 = 100.00 ORGAN
ignature	10	20.00 = 20.00 EXPEDIT
yped Name:		

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