FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

6 . W . / MB . \ \	OF ORGANIZAT	TION ZOIS JUN 29	
LIMITED LIA	ABILITY COMPAI	NY SECOND AM 10.	16
(Instructions	on back of application)	TION 2015 JUN 29 AM 10. NY SECRETARY OF STATE OF IDAHO	TE
1. The name of the limited lia	bility company is:	.0440	
KTG HOLDINGS LLC			. (
2. The complete street and m 7040 W. AMBLESIDE DR, BO (Street Address)		ial designated office:	
(Mailing Address, if different than street	et address)		.
3. The name and complete st	reet address of the registe	red agent:	
TIFFANI SNELLING	7040 W. AMBLES	IDE DR, BOISE ID 83709	
(Name)	(Street Address)		
 The name and address of a company: 	at least one member or ma	anager of the limited liability Address	
<u>Name</u> TIFFANI SNELLING	TOAN W AMPLES	IDE DR, BOISE ID 83709	l i
			-
5. Mailing address for future of 7040 W. AMBLESIDE DR, BO	•	eport notices):	-
6. Future effective date of filir	ng (optional):		-
Signature of a manager, me	ember or authorized		
person.		Secretary of State use only	
Signature	ey	IDAKO SECRETARY OF	
Typed Name: TIFFANI SNELLIN	G	06/29/2015 05	
·	- -	CK: 3241 CT: 311518 BE 1@ 100.00 = 100.00 OR	
Signature			· · · · · · · · · · · · · · · · · · ·
Typed Name:		/- >	

W153430