



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2014 DEC 15 AM 10:10

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Kite Claims, LLC

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

2875 W Pudu St, Meridian ID 83646

(Street Address)

(Same)

(Mailing Address, if different than street address)

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

Aleksei Vasilchenko

(Name)

2875 W Pudu St, Meridian ID 83646

(Street Address)

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

Name

Address

Aleksei Vasilchenko

2875 W Pudu St, Meridian ID 83646

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

2875 W Pudu St, Meridian ID 83646

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Aleksei Vasilchenko

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

12/15/2014 05:00

CK:2424886 CT:172099 BH:1452896

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