



## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

09 NOV 19 AM 8: 48

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

1. The name of the limited liability of	company is: STATE OF IDAHO
	Kaizen Marketing, LLC
•	addresses of the initial designated/principal office: e Way, #170 Post Falls, Idaho. 83854
(Street Address)	
(Mailing Address, if different than street address	2)
3. The name and complete street ac	
Joshua Andrews	2600 E. Seltice Way, #170 Post Falls, Idaho. 83654
(Name)	(Street Address)
company:	t one member or manager of the limited liability
<u>Name</u> Joshua Andrews	Address P.O. Box 3370 Post Falls, Idaho. 83877
Joshua Andrews	P.O. BOX 3370 Post Fails, Idano. 63677
**************************************	
E Mailing address for future correct	andense (annual senert matieses).
5. Mailing address for future corresp	e Way, #170 Post Falis, Idaho. 83854
	5 17ay, #170 1 doi:1 dilo, lodilo. 5000-7
6. Future effective date of filing (opt	ional):
,	
Signature of organizer(s). (An organizer	is a member, or is
acting in behalf of a member or members).	
- 1. MI-	Secretary of State use only
Signature Leabur Andrew	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Typed NameJoshua Andrew	
Cimpoturo	IDAHO SECRETARY OF STATE  11/19/2009 95:80  CX: 6883 CT: 242417 9H: 1196105 1 0 188.00 = 100.00 ORGAN LLC \$
Signature	CX: 6883 CT: 242417 BH: 1196185
Typed Name:	

W88431