

## CERTIFICATE OF ORGANIZATION

	BILITY COMPANT	2014 JAN -6 AM 9: 41	
(Instructions of	on back of application)	SECREPARI LA SIMIE	
1. The name of the limited liab	name of the limited liability company is:		
KAYAK BURNS LLC		STATE OF SIMO	
2. The complete street and mai	_	designated office:	
(Street Address)	-		
PO BOX 3804, KETCHUM, IDAH (Mailing Address, if different than street a			
3. The name and complete stre	•	agent:	
DEBORAH BURNS	380 7TH STREET, KE	TCHUM ID 83340	
(Name)	(Street Address)		
<ol> <li>The name and address of at company:</li> <li>Name</li> </ol>	Todat one member of mana	Address	
DEBORAH BURNS	PO BOX 3804, KETCH		
5. Mailing address for future con C/O ABACUS TAX SERVICES, F	rrespondence (annual repor PO BOX 3573, KETCHUM, ID 833	•	
6. Future effective date of filing	(optional):		
Signature of a manager, memperson.	ber or authorized		
Signature		Secretary of State use only	
Typed Name: DEBORAH BURNS		W132845	
Signature		IDAHO SECRETARY OF ST	
Typed Name:		01/06/2014 05 CX: 1801 CT: 92755 BH:	

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9/21/2012

CK: 1801 CT: 92755 BH: 1484453 1 8 180.00 = 188.98 ORGAN LLC # 2