







STATE OF IDAHO Office of the secretary of state, Phil McGrane **CERTIFICATE OF ORGANIZATION LIMITED** LIABILITY COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00

For Office Use Only

-FILED-

File #: 0005836304

Date Filed: 8/2/2024 11:39:48 AM

| Certificate of Organization Limited Liability Compa Select one: Standard, Expedited or Sa descriptions below) | - | Standard (filing fee \$100) | |
|---|--|---|-----------------|
| 1. Limited Liability Company Name | | | |
| Type of Limited Liability Company | | Limited Liability Company | |
| Entity name | | KJ Madsen, LLC | |
| 2. The complete street address of the principal off | ce is: | | |
| Principal Office Address | | 220 NORTH LENT AVENUE NEWDALE, ID 83436 | |
| 3. The mailing address of the principal office is: | | | |
| Mailing Address | | PO BOX 81 NEWDALE, ID 83436-0081 | |
| Registered Agent Name and Address | | | |
| Registered Agent | | TROY D. EVANS | |
| | | Registered Agent | |
| | | Physical Address | |
| | | 49 PROFESSIONAL PLZ REXBURG, ID 83440-2024 | |
| | | Mailing Address | |
| | | 49 PROFESSIONAL PLZ | |
| | | REXBURG, ID 83440-2024 | |
| ☑ I affirm that the registered agent a | ppointed has consented | d to serve as registered agent fo | or this entity. |
| 5. Governors | | | |
| Name | Address | | |
| Kire Madsen | 220 NORTH LENT AVENUE P. O. BOX 81 NEWDALE, ID 83436 | | |
| Signature of Organizer: | | | |
| TROY EVANS | | | 08/02/2024 |
| Sign Here | | | Date |