

CERTIFICATE OF ORGANIZATION ILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 AUG 12 AM 9: 45

(West desired on bac	sk of application)	SECRETARY OF GYAT
1. The name of the limited liability co	ompany is:	SECRETARY OF STAT STATE OF IDAHO
R 14 K Transportation		
2. The complete street and mailing at 1419 e maple st Caldwell Id 83605 (Street Address)	ddresses of the initial design	ated office:
(Mailing Address, if different than street address)		
3. The name and complete street add	dress of the registered agent	
TyRone Relka	1419 e maple st Caldwell Id 83605	
(Name)	(Street Address)	
I. The name and address of at least of company: Name Typess Relies	Addres	55
TyRone Relka	1419 e maple st Caldwell Id 83605	
Kaden T Gardner-Relka	1419 e maple st Caldwell µ83605	
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. Mailing address for future correspor	ndence (annual report notice	s):
1419 e maple st caldwell id83605	(-,·
Fuhin off at		
Future effective date of filing (option	nal):	
anature of a managed		
gnature of a manager member or rson.	authorized	
Nest D	Secre	etary of State use only
ped Name: TyRone Relka		
ped Name: TyRone Relka		
gnature Koden T.C. an	dery P	IDAHO SECRETARY OF STATE 5/12/2013 05:00
ped Name: Kaden T Gardner-Relka		ASH CT: 286266 BH: 1385647 10.88 = 100.80 ORGAN LLC # 2

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