

FILED EFFECTIVE

	CERTIFICATE OF C LIMITED LIABILI		ANY 2014 JUL 22 PM 2: 42
	(Instructions on back	< of application)	SECRETARY OF STATE STATE OF IDAHO
I. The n	name of the limited liability co	mpany is:	
K	s Kisses	Espresso L	<u> </u>
	complete street and mailing ac		
	023 N Government	way CDA	10 83815
(Stree	t Address)  ). box 242 Desnet	1D 83824	
(Mailir	ng Address, if different than street address)	120001	
3. The r	name and complete street add	lress of the reg	istered agent:
٠. ،			. 5 - 4 10 - 60 - 1
YV.	ette Cook	(Street Address)	leme Desnet 1D 83624
<b>C</b>	-,		
l. The i	name and address of at least	one member or	manager of the limited liability
comp	pany:		Adduse
. (	Name r	197 Mar	Address
<u>Jel</u>	tery middleton	231 / 10	telme Desnet ID 83824
700	queine middleta-vazquez	237 Mec	ture Desmet 10 83824
5. Maili	ng address for future correspo	ondence (annua	al report notices):
	2. box 242 Desret		
_1.	8. 001- 001A DEDI-01		
6. Futu	re effective date of filing (option	onal):	
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Signatu	re of a manager, member o	or authorized	
erson.	والانام ملادمون	ſ	Secretary of State use only
مرية عريران			
Signatur	11. 11. 11.	70	07/22/2014 05:00
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Olano		$\langle \cdot \rangle$	IC 100.00 - 100.00 ORGAN DE
Signatur Typed N			Liluta A .m
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9/21/2012

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