

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 11 APR 22 AM 8: 55

(Instructions on back of application)

. The name of the limited liab	ility company is:	SECFACION OF STATE STATE OF IDAHO	
	K9 KUIZINE, LLC.	O	
2. The complete street and mai 1625 S. Highline Drive Idaho Fa	-	al designated/principal office:	
(Street Address)			
(Mailing Address, if different than street	address)		
. The name and complete stre	et address of the register	red agent:	
Brad W. Rodgers		Dr. Idaho Falls, ID 83401	
(Nате)	(Street Address)		
. The name and address of at company: Name	least one member or ma	nager of the limited liability Address	
Janet A. Rodgers	1625 S. Highline Dr	1625 S. Highline Drive Idaho Falls, ID 83401	
	• • • • • • • • • • • • • • • • • • •		
. Mailing address for future co	rrespondence (annual rep	port notices):	
Same #4			
	·		
. Future effective date of filing	(optional):		
	(opacital):		
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gnature of a manager, mem	iber or authorized		
erson.		Secretary of State use only	
ignature 2	thos		
	1217		
yped Name: Mahet A. Rodgers			
ignature		IDAHO SECRETARY OF STATE	
ignature		04/22/2011 05:0 CK: 5618 CT: 258842 BH: 1278	
yped Name:		1 0 100.00 = 100.00 ORGAN LLC	

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