

FILED EFFECTIVE

2011 JUN -9 AM 10: 23

251



CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY

(Instructions on back of application)

1. The name of the limited liability company is:

KODIAK MANAGEMENT, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

2711 N TANGLEROSE PL, EAGLE, ID 83616

(Street Address)

PO BOX 25, EAGLE, ID 83616

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

RYAN REILLEY

(Name)

2711 N TANGLEROSE PL, EAGLE, ID 83616

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

RYAN REILLEY

PO BOX 25, EAGLE, ID 83616

STEVEN MICKELSEN

PO BOX 25, EAGLE, ID 83616

5. Mailing address for future correspondence (annual report notices):

PO BOX 25, EAGLE, ID 83616

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: WENDY BYFORD

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
06/09/2011 05:00
CK: 700349 CT: 172099 BH: 1277618
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

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