

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 JUN 25 AM 8: 27

1.	The name of the limited liability compar	ny is:	SECRETARY OF STATI STATE OF IDA <b>HO</b>	E
		Kajuda LLC	THE OF IDAHO	•
2.	The complete street and mailing addresses of the initial designated/principal office:  2557 N Destiny Ave, Kuna, ID, 83634			
	(Street Address)	<i>y 7</i> (0, 1(and, 15	, 00001	
	(Mailing Address, if different than street address)	<u> </u>		· · · · · · · · · · · · · · · · · · ·
3.	The name and complete street address of the registered agent:			
	John Cox	2557 N	Destiny Ave, Kuna, ID, 83634	
	(Name) (Si	treet Address)		•
4.	The name and address of at least one n company:	nember or m	anager of the limited liabili	ty
,	Name		Address 15 00004	*
	John Cox	2557 N Destiny Ave, Kuna, ID, 83634		
	Cameron Watson	3312 N Acre Lane, Boise, ID, 83704		
•				<del></del>
		<u></u>		<del></del> ;
5.	Mailing address for future corresponden	ice (annual r	eport notices):	5
	Kajuda, 2557 N De	stiny Ave, Kuna	a, ID, 83634	<u>:</u>
6	Estura official data of filing (entional):			
0.	Future effective date of filing (optional):			
_	nature of organizer(s). (An organizer is a men	nber, or is		
acti	ng in behalf of a member or members).		Secretary of State use onl	<u></u>
Sig	nature / ///	- Sic. PMC		:
	ped Name: Cameron Watson			
	nature	ms/LC formstoert_org_lbc.PMD	19940 SECRETARY 96/25/2989 CK: 1981 CT: 93554	OF STATE ) 05 = 00 BH: 1176328   108601   1
	and Name		7 # 100+00 - 100+00	CHARLES A L

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