



0004213577

**STATE OF IDAHO***Office of the secretary of state, Lawrence Denney***CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY**

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$100.00

*For Office Use Only***-FILED-**

File #: 0004213577

Date Filed: 3/18/2021 5:25:32 PM

| Certificate of Organization Limited Liability Company                                                                                                                                 |                                                                                                                                                                              |      |         |                    |                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|---------|--------------------|-------------------------------------------|
| Select one: Standard, Expedited or Same Day Service (see descriptions below)                                                                                                          | Standard (filing fee \$100)                                                                                                                                                  |      |         |                    |                                           |
| 1. Limited Liability Company Name                                                                                                                                                     |                                                                                                                                                                              |      |         |                    |                                           |
| Type of Limited Liability Company                                                                                                                                                     | Limited Liability Company                                                                                                                                                    |      |         |                    |                                           |
| Entity name                                                                                                                                                                           | Kilgore Coaching LLC.                                                                                                                                                        |      |         |                    |                                           |
| 2. The complete street address of the principal office is:                                                                                                                            |                                                                                                                                                                              |      |         |                    |                                           |
| Principal Office Address                                                                                                                                                              | 12864 CONCHOS AVE.<br>KUNA, ID 83634                                                                                                                                         |      |         |                    |                                           |
| 3. The mailing address of the principal office is:                                                                                                                                    |                                                                                                                                                                              |      |         |                    |                                           |
| Mailing Address                                                                                                                                                                       | GREYSON KILGORE<br>623 S UNIVERSITY BLVD<br>NAMPA, ID 83686-5800                                                                                                             |      |         |                    |                                           |
| 4. Registered Agent Name and Address                                                                                                                                                  |                                                                                                                                                                              |      |         |                    |                                           |
| Registered Agent                                                                                                                                                                      | Registered Agent<br>Greyson D Kilgore<br>Physical Address:<br>623 S. UNIVERSITY BLVD<br>NAMPA, ID 83686<br>Mailing Address:<br>623 S UNIVERSITY BLVD<br>NAMPA, ID 83686-5800 |      |         |                    |                                           |
| <input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.                                          |                                                                                                                                                                              |      |         |                    |                                           |
| 5. Governors                                                                                                                                                                          |                                                                                                                                                                              |      |         |                    |                                           |
| <table border="1"><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>Greyson D. Kilgore</td><td>623 S. UNIVERSITY BLVD<br/>NAMPA, ID 83686</td></tr></tbody></table> |                                                                                                                                                                              | Name | Address | Greyson D. Kilgore | 623 S. UNIVERSITY BLVD<br>NAMPA, ID 83686 |
| Name                                                                                                                                                                                  | Address                                                                                                                                                                      |      |         |                    |                                           |
| Greyson D. Kilgore                                                                                                                                                                    | 623 S. UNIVERSITY BLVD<br>NAMPA, ID 83686                                                                                                                                    |      |         |                    |                                           |
| Signature of Organizer:                                                                                                                                                               |                                                                                                                                                                              |      |         |                    |                                           |
| <i>Greyson Daniel Kilgore</i>                                                                                                                                                         | <i>03/18/2021</i>                                                                                                                                                            |      |         |                    |                                           |
| Sign Here                                                                                                                                                                             | Date                                                                                                                                                                         |      |         |                    |                                           |

B0592-8116 03/18/2021 5:28 PM Received by ID Secretary of State Lawrence Denney