



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2015 JAN -5 PM 12: 56

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

KAINDA RAINE LLC

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

104 E FAIRVIEW AVE #206 MERIDIAN IDAHO 83642

(Street Address)

(Mailing Address, if different than street address)

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

DAVE LAKHANI

(Name)

104 E FAIRVIEW AVE #206 MERIDIAN ID 83642

(Street Address)

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

Name

Address

PORTFOLIO

104 E FAIRVIEW AVE #206 MERIDIAN ID 83642

RONALD STUKEY

2124 SOUTH FOREMAN DRIVE PERU IN 46970

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

104 E FAIRVIEW AVE #206 MERIDIAN ID 83642

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: DAVE LAKHANI

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

01/05/2015 05:00

CK:1126 CT:300335 BH:1455557

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