

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

 2009 MAR 11 AM 11:24
 SECRETARY OF STATE
 STATE OF IDAHO

1. The name of the limited liability company is:

K-Line Group, LLC

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

2600A E Seltice Way Suite #193, Post Falls, Idaho 83854

(Street Address)

(Mailing Address, if different than street address)

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

Kevin Edmundson

(Name)

2600A E Seltice Way Suite #193, Post Falls, Id 83854

(Street Address)

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

Name**Address**
Kevin Edmundson
2600A E Seltice Way Suite #193, Post Falls, Id 83854

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

SAME

6. Future effective date of filing (optional): _____

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

 Typed Name: Kevin Edmundson

Signature

Typed Name: _____

Secretary of State use only

 IDAHO SECRETARY OF STATE
 03/11/2009 05:00
 CX: 211437 CT: 172899 BH: 1168745
 1 @ 188.00 = 188.00 ORGAN LLC # 2
 Revised 07/2008

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 03/11/2009 05:00
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2009-03-11 09:27