



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2013 DEC -5 AM 9:19

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

KV Landon, LLC

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

3500 Maiben St., Idaho Falls, ID 83406

(Street Address)

(Mailing Address, if different than street address)

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

Verle K. Landon

(Name)

3500 Maiben St., Idaho Falls, ID 83406

(Street Address)

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

Name

Address

Verle K. Landon

3500 Maiben St., Idaho Falls, ID 83406

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

3500 Maiben St., Idaho Falls, ID 83406

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

Signature of a manager, member or authorized person.

Signature Verle K. Landon

Typed Name: Verle K. Landon

Secretary of State use only

Signature _____

Typed Name: _____

IDAHO SECRETARY OF STATE
12/05/2013 05:00
CK: 2420 CT: 200796 BH: 1400576
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