



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 DEC -5 PM 2:02

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Coach Lee Leslie LLC

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

947 E Winding Creek Suite 200

(Street Address)

Eagle, Idaho 873616

(Mailing Address, if different than street address)

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

Jenni L Anderson

(Name)

947 E Winding Creek Suite 200 Eagle, Idaho 83616

(Street Address)

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

Name

Address

Lee Leslie

2217 W Preston Eagle, Idaho 83616

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

875 E Plaza Drive Eagle, Idaho 83616

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: _____

Jenni L. Anderson

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
12/05/2008 05:00
CX: CASH CT: 232816 BH: 1147133
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