251

20H DEC -2 PM 4: 20



CERTIFICATE OF ORGANIZATION STATE OF IDAHO

45.00 TO 1	(Instructions on bac	k of application)	
1. The	e name of the limited liability company is:		
	SVSA	Training Academy, LLC	
2. The	2. The complete street and mailing addresses of the initial designated office:		
	c/o Jill Eshman Law, 311 Main Street, Ste. B, Ketchum ID 83340		
c/o	(Street Address) c/o Jill Eshman Law, PO Box 4991, Kelchum ID 83340		
	(Mailing Address, if different than street address)		
3. The	The name and complete street address of the registered agent:		
	W. Eshman	Jill Eshman Law, 311 Main St., Ste. B, Ketchum ID	
(Ne:	me)	(Street Address)	
 The name and address of at least one member or manager of the limited liability company: 			
	<u>Name</u>	<u>Address</u>	
Ste	ven Shafran	c/o Jill Eshman Law, 311 Main St., Ste. B,	
		Ketchum, ID 83340	
	A STATE OF THE STA		
5 Mail	ing address for future correspo	odence (ennual report notices):	
 Mailing address for future correspondence (annual report notices): c/o Jill Eshman Law, PO Box 4991, Ketchum ID 83340 			
Future effective date of filing (optional):			
Signatur person.	re of a manager member or	authorized	
•	CANAL	Secretary of State use only	
Signature			
Typed N	ame: Steven Shafran	Physica management	
Sionature	e		
Typed Name:			

centurg to Pley 07/2010

IDAHO SECRETARY OF STATE

12/02/2011 05:00

CK: 845477 CT: 172899 BH: 1380178
1 0 108.00 = 100.00 ORGAN LLC # 2
1 0 20.00 = 20.00 EXPEDITE C # 3

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