



0003912995

**STATE OF IDAHO***Office of the secretary of state, Lawrence Denney***CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY**

Idaho Secretary of State  
PO Box 83720  
Boise, ID 83720-0080  
(208) 334-2301

Filing Fee: \$100.00 - Make Checks Payable to Secretary of State

*For Office Use Only***-FILED-**

File #: 0003912995

Date Filed: 6/21/2020 4:52:10 PM

| Certificate of Organization Limited Liability Company   |  |      |         |                  |  |
|---|--|------|---------|------------------|--|
| Select one: Standard, Expedited or Same Day Service (see descriptions below)  | Standard (filing fee \$100)  |      |         |                  |  |
| 1. Limited Liability Company Name   |  |      |         |                  |  |
| Type of Limited Liability Company   | Limited Liability Company  |      |         |                  |  |
| Entity name   | Lifelong Learning Design Solutions, LLC.   |      |         |                  |  |
| 2. The complete street address of the principal office is:  |  |      |         |                  |  |
| Principal Office Address  | SUZANNE HADLEY<br>1558 CHRISTENSEN DR<br>BLACKFOOT, ID 83221   |      |         |                  |  |
| 3. The mailing address of the principal office is:  |  |      |         |                  |  |
| Mailing Address   | SUZANNE HADLEY<br>1558 CHRISTENSEN DR<br>BLACKFOOT, ID 83221-3709  |      |         |                  |  |
| 4. Registered Agent Name and Address  |  |      |         |                  |  |
| Registered Agent  | Registered Agent<br>Suzanne M Hadley<br>Physical Address:<br>SUZANNE HADLEY<br>1558 CHRISTENSEN DR<br>BLACKFOOT, ID 83221<br>Mailing Address:<br>SUZANNE HADLEY<br>1558 CHRISTENSEN DR<br>BLACKFOOT, ID 83221-3709 |      |         |                  |  |
| <input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.  |  |      |         |                  |  |
| 5. Governors  |  |      |         |                  |  |
| <table border="1"><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>Suzanne M Hadley</td><td>SUZANNE HADLEY<br/>1558 CHRISTENSEN DR<br/>BLACKFOOT, ID 83221</td></tr></tbody></table> |  | Name | Address | Suzanne M Hadley | SUZANNE HADLEY<br>1558 CHRISTENSEN DR<br>BLACKFOOT, ID 83221 |
| Name  | Address  |      |         |                  |  |
| Suzanne M Hadley  | SUZANNE HADLEY<br>1558 CHRISTENSEN DR<br>BLACKFOOT, ID 83221   |      |         |                  |  |
| Signature of Organizer:   |  |      |         |                  |  |
| <u>Suzanne M. Hadley</u>  | <u>06/21/2020</u>  |      |         |                  |  |
| Sign Here   | Date   |      |         |                  |  |

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