

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

CE &	(Instructions on back	of application) SECON AMO.	
1.	The name of the limited liability con	npany is: Learning Services LLC SECRETARY OF STATE OF IDAR STATE	
	Latah	Learning Services LLC	
2.	953 North Cleveland Street Moscow ID83843		
	(Street Address)		
	(Mailing Address, if different than street address)		
3.	The name and complete street addr	ess of the registered agent:	
	Gillian Sharma	953 North Cleveland Street Moscow ID83843	
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company: Name Address		
	Gillian Sharma	953 North Cleveland Street Moscow ID83843	
	Linda Edwards	852 North Grant Street Moscow ID83843	

E	Mailing address for future correspon	adones (annual report notices):	
 Mailing address for future correspondence (annual report notices): 953 North Cleveland Street Moscow Id83843 		· · · · · · · · · · · · · · · · · · ·	
	300 North Gloveland Substitutional Nation		
6. Future effective date of filing (optional):			
Signature of a manager, member or authorized			
person. Secretary of State use only			
Signature <u>J. W. M. S. Gillian Sharma</u> Typed Name: Gillian Sharma			
,,,			

IDAHO SECRETARY OF STATE 07/02/2012 05:00 CK: 1520 CT: 271981 BH: 1338425 1 9 188.06 = 168.00 ORGAN LLC # 2

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Signature Linda Jeanne Edevards

Typed Name: Linda Edwards

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