

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 JUN 12 AM 8: 44

\initia dollorio	on buok of application,	SECRETARY OF	
1. The name of the limited lia	bility company is:	SECRETARY OF STATE STATE OF IDAHO	
	HARDCOURT SPORTS, L	TC	
2. The complete street and ma	ailing addresses of the init	tial designated/principal office:	
	540 UNIVERSITY DRIVE		
(Street Address)	POCATELLO, ID 83201	1	
(Mailing Address, if different than stree			
3. The name and complete str	reet address of the registe	ered agent:	
JARED HATCH	540 UNIVERSI	TY DRIVE, POCATELLO, ID 83201	
(Name)	(Street Address)		
<ol><li>The name and address of a company:</li></ol>	at least one member or ma	anager of the limited liability	
Name	·	Address	
JARED HATCH	540 UNIVERSI	540 UNIVERSITY DRIVE, POCATELLO, ID 83201	
ANGELA HATCH	540 UNIVERSIT	TY DRIVE, POCATELLO, ID 83201	
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5. Mailing address for future of	correspondence (annual re	eport notices):	
•	NIVERSITY DRIVE, POCATEL	•	
6. Future effective date of filin	g (optional):		
Signature of organizer(s). (An org	-		
acting in behalf of a member or member	bers).	Secretary of State use only	
Signature	At I		
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Signature Anaes	6 26 to 1	IDANO SECRETARY OF STATE  06/12/2009 05-00	
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