



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2015 NOV 16 AM 9:57

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

New Horizons Consulting LLC.

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

1027 E Maroon Creek Dr.

(Street Address)

Hayden, ID, 83835

(Mailing Address, if different than street address)

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

Jeff Johns

(Name)

1027 E Maroon Creek Dr., Hayden, ID, 83835

(Street Address)

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

Name

Address

Jeff Johns

1027 E Maroon Creek Dr., Hayden, ID, 83835

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

1027 E Maroon Creek Dr., Hayden, ID, 83835

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Jeff Johns

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

11/16/2015 05:00

CK: 516 CT: 316837 BH: 1500554

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