



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 JUL 13 AM 9:27

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

EBL Boise, LLC

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

3634 Laura Lane, Rockford, IL 61114

(Street Address)

(Mailing Address, if different than street address)

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

Steve Gustafson

(Name)

88 Clearwater Ct Tamarack ID 83615

(Street Address)

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

**Name**

**Address**

Experience Based Learning, Inc.

3634 Laura Lane, Rockford, IL 61114

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

EBL Boise, LLC, c/o Craig P. Thomas, 2902 McFarland Road, Suite 400, Rockford, IL 61107

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Steve Gustafson, as Pres. of Member

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

07/13/2015 05:00

CK:172239 CT:239305 BH:1483490

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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