



# CERTIFICATE OF ORGANIZATION **FILED EFFECTIVE** LIMITED LIABILITY COMPANY 10 AUG 20 PM 12:25

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Arnold Schedule Award Consulting Solutions, LLC

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

2206 Roanoke Drive

(Street Address)

Boise, Idaho 83712

(Mailing Address, if different than street address)

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

Patricia Arnold

(Name)

2206 Roanoke Drive, Boise, ID 83712

(Street Address)

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

**Name**

**Address**

Patricia Arnold

2206 Roanoke Drive, Boise, ID 83712

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

2206 Roanoke Drive, Boise, ID 83712

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Managing Member

Signature

Typed Name:

Secretary of State use only

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08/20/2010 05:00  
CK: 498659 CT: 172099 BH: 1235663  
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