n:MyFax - Amy Allsop To:LLC application - AcademiTech (12083342080)

14:12 08/26/11GMT-05 Pg 01-02 FILED EFFECTIVE

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		FILED EFFE
	ATE OF ORGANIZATI	ION
LIMITED	LIABILITY COMPAN	ΥY
(Instru	ctions on back of application)	2011 AUG 26 PM 12:
1. The name of the limit	ted liability company is:	SECRETARY OF ST STATE OF IDAH
	AcademiTech, LLC	STATE OF IDAN
2. The complete street a	and mailing addresses of the initia	I designated/principal office:
892 N. Woodstream Plac	xe, Eagle ID 83616	
(Street Address)		
(Mailing Address, if different th	ian street address)	
3. The name and compl	ete street address of the registere	ed agent:
Amy Allsop	892 N. Woodstream f	Place, Eagle ID 83616
(Name)	(Street Address)	
 The name and address company: Name 	ss of at least one member or man	
Arny Allsop	892 N. Woodstream I	Place, Eagle ID 83616
	<u></u>	
5. Mailing address for fu	ture correspondence (annual repo	ort notices):
892 N. Woodstream Plac	e, Eagle ID 83616	
6. Future effective date of	of filing (optional):	
Signature of a manager	, member or authorized	
person.		Secretary of State use only
Signature (mylle)	180	
Typed Name: <u>Amy</u>	Allsop	
V	1	
Signature		
Signature Typed Name:		DAHO SECRETARY OF STO
	cert org 11c Rev. 07/2010	IDAHO SECRETARY OF STI 08/26/2011 05 CK: 768551 CT: 172099 BH: 1 @ 180.00 # 107

