



Office of the secretary of state, Lawerence Denney CERTIFICATE OF ORGANIZATION LIMITED **LIABILITY COMPANY** 

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00

For Office Use Only

-FILED-

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| Certificate of Organization Limited Liability Company<br>Select one: Standard, Expedited or Same<br>descriptions below) | Day Service (see  | Standard (filing fee \$100)   |                |
|---|---|---|----------------|
| 1. Limited Liability Company Name   |   |   |                |
| Type of Limited Liability Company   |   | Limited Liability Company   |                |
| Entity name   |   | Practicum Academy, LLC  |                |
| 2. The complete street address of the principal office is:  |   |   |                |
| Principal Office Address  |   | STEVEN KEELY<br>540 NORTH EAGLE ROAD<br>105<br>EAGLE, ID 83616  |                |
| 3. The mailing address of the principal office is:  |   |   |                |
| Mailing Address   |   | STEVEN KEELY<br>540 N EAGLE RD<br>APT 105<br>EAGLE, ID 83616-5386   |                |
| 4. Registered Agent Name and Address  |   |   |                |
| Registered Agent  I affirm that the registered agent appoi  | nted has consented                                      | Registered Agent Steven KEELY Physical Address: STEVEN KEELY 540 NORTH EAGLE ROAD 105 EAGLE, ID 83616 Mailing Address: STEVEN KEELY 540 N EAGLE RD APT 105 EAGLE, ID 83616-5386 I to serve as registered agent fo | r this entity. |
| Name  |   | Address   |                |
| Steven KEELY  | STEVEN KEELY<br>540 NORTH EAG<br>105<br>EAGLE, ID 83616 |   |                |
| Signature of Organizer:   |   |   |                |
| Steven Keely  |   |   | 03/13/2022     |
| Sign Here   |   |   | Date           |