251



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANYIN APR -3 PM 1: 54

	(Instructions on b	ack of application)	SECRETARY OF STATE	
1. The nam	e of the limited liability		STATE OF IDAHO	
		company is:		
	se Driving School LLC			
2. The com 850 Aloe	plete street and mailing Vera Ct., Kuna, ID 83634	addresses of the initi	al designated office:	
(Street Add Same	ress)			
	dress, if different than street addres	n)		
	e and complete street a	·	ed agent:	
Kathryn I	loelle Williams	850 Aloe Vera Ct., I	Kuna, ID 83634	
(Mattie)		(Street Address)		
4. The name company	e and address of at leas : <u>Name</u>	t one member or mar	nager of the limited liability	
David J R	ickerman	850 Aloe Vera Ct., Kuna, ID 83634		
Kathryn N	Kathryn Noelle Williams 850 Alo) Aloe Vera Ct., Kuna, ID 83634	
5. Mailing ac	idress for future corresp	ondence (annual rep	ort notices);	
6. Future eff	ective date of filing (opti	onal):		
Signature of person.	a manager, member (or authorized		
			Secretary of State use only	
	warre with	ams		
Typed Name:	Kathryn Noelle Williams			
Signature &	wid Richer	man_		
Typed Name:	David J'Rickerman	/		

9/21/2012

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IDAHO SECRETARY OF STATE

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CK: 1786264 CT: 172099 BH: 1418517
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