

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE

(Instructions on back of application)

2011 SEP -9 AM 8: 25

	(mondone on basis		SECRETARY OF STATE
1.	The name of the limited liability con	mpany is:	STATE OF IDAHO
••		unbeams Academy, LLC	
2.	The complete street and mailing addresses of the initial designated/principal office: 2934 NE Vista Way, Mountain Home, ID 83647		
	(Street Address)		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Jared Hart, Farm Bureau Agent	1010 Sunset Strip St., M	Mountain Home, ID 83647
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name	2024 NE Vieta Mey M	Address ountain Home, ID 83647
	Saskia Baxter	2934 INE VISIA VVAY, IVI	Alitaii Tioriis, ib 000+7
			•
5.	Mailing address for future correspo	ndence (annual report	notices):
	2934 NE Vista Way, Mountain Home, iE		
			<u> </u>
6.	Future effective date of filing (option	nal):	
Sig	gnature of a manager, member o	r authorized	
pe	rson.		Secretary of State use only
Sin	gnature Joshia Barte	<u>.</u>	
	ped Name: Saskia Baxter		
. 3			IDANO SECRETARY OF STATE
Sic	gnature		09/09/2011 05:00 CK: 780082 CT: 172899 BH: 1289784
	ped Name:		1 0 100.00 = 100.00 ORGAN LLC # 2