

Signature:

Rev. 01/2018

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code
Base Filing fee: \$100.00 typed, \$120 not typed
Complete and submit the application in duality.

2018 FEB -9 AM 9: 06

| Complete and sub  | mit the application in <u>duplicate</u> .         | SECRETARY OF STATE   |
|---|---|--|
| The name of the limited liabili                                 | ty company is:                                    | SECRETARY OF STATE<br>STATE OF IDAHO   |
| Hands On Minds On Educationa                                    |   |  |
| (Remember to include the v                                      | vords "Limited Liability Company," "Elmited Compa | ny, "or the abbreviations L.L.C., LLC, or LC)  |
| The complete street and mail                                    | ing addresses of the principal office is          | S:   |
| (Street Address)  |   |  |
| Nampa ID 83686  |   |  |
| (Mailing Address, if different)                                 |   |  |
| The name and complete street                                    | et address of the registered agent:               |  |
| Heather Lee   | 3849 E Clear Springs Dr, N                        | lampa ID 83686   |
| (Name)  | (Address)   |  |
| Heather Lee<br>(Name)   | 3849 E Clear Springs Dr, N                        | Nampa ID 83686   |
| (Namo)  | (Address)   |  |
| (Name)  | (Address)   |  |
| (Name)  | (Address)   |  |
| (Name)  |   |  |
| (Naile)   | (Address)   |  |
| Mailing address for future cor<br>3849 E Clear Springs Dr, Namp | respondence (annual report notices):              |  |
| (Address)   |   |  |
|   |   |  |
| ature of organizer(s).  | <del> </del>                                      | Secretary of State use only  |
| ted Name: Heather Lee   |   | and the state of t |
| ature:  | 7   | IDAMO SECRETARY OF STATE  02/09/2018 05:00  CK:1212 CT:352570 BH:162608  |
| ed Name:  |   | 16 100.00 = 100.00 ORGAN LLC   |
|   | }   |  |

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