



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

**FILED EFFECTIVE**

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

2016 OCT 20 AM 11:33

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

First Response Emergency Services Training, LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

43 E. Deer Flat Rd, Kuna, ID 83634

(Street Address)

(Mailing Address, if different)

3. The name of the registered agent and street address of the registered agent:

Season Woods McClelland

43 E. Deer Flat Rd, Kuna, ID 83634

(Name)

(Address cannot be a post office box or postal mail box)

4. The name and address of at least one governor of the limited liability company:

Season Woods McClelland

43 E. Deer Flat Rd, Kuna, ID 83634

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):

43 E. Deer Flat Rd, Kuna, ID 83634

(Address)

Signature of organizer(s).

Signature: Season Woods McClelland

Printed Name: Season Woods McClelland

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Secretary of State use only  
IDAHO SECRETARY OF STATE  
10/20/2016 05:00

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