



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2014 MAY 16 AM 9:01

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

BACKYARD FRIENDS CHILDCARE, LLC

2. The complete street and mailing addresses of the initial designated office:

800 PRAIRIE TRAIL CIR

(Street Address)

KIMBERLY, ID 83341

(Mailing Address, if different than street address)

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

ALLEY G.

(Name)

JOHNSON

(Street Address)

413 main street south  
Kimberly ID 83341

4. The name and address of at least one member or manager of the limited liability company:

**Name**

**Address**

ALLEY G.

JOHNSON

413 main street south  
Kimberly ID 83341

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

800 PRAIRIE TRAIL CIR, KIMBERLY, ID 83341

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

  
\_\_\_\_\_  
Typed Name: ALLEY G. JOHNSON

Signature

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

05/16/2014 05:00

CK:142 CT:296966 BH:1425158

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