



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 JUL 31 AM 8:53

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Safety Training LLC

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

717 West 175 North Moreland, Idaho 83256

(Street Address)

Box J Moreland, Idaho

(Mailing Address, if different than street address)

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

Barry Edwards

(Name)

717 W. 175 N. Moreland, Idaho 83256

(Street Address)

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

**Name**

**Address**

Barry Edwards

717 W. 175 N. Moreland, Idaho 83256

David Kevin Quick

12889 West Reservation Rd. Pocatello, Idaho 83202

Susan Edwards

717 W. 175 N. Moreland, Idaho 83256

Joylene Quick

12889 West Reservation Rd. Pocatello, Idaho 83202

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

Box J Moreland, Idaho 83256

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

*Barry D. Edwards*

Typed Name:

Barry D. Edwards

Signature

*David Kevin Quick*

Typed Name:

David Kevin Quick

Secretary of State use only

g:\comp\forms\llc form\llc org\_1a.PMD  
Revised 07/2008

IDAHO SECRETARY OF STATE  
07/31/2009 05:00  
CK: 799 CT: 239286 DH: 1101039  
1 @ 100.00 = 100.00 ORGAN LLC # 2

405820

FILED EFFECTIVE