



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

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

Complete and submit the application in duplicate.

FILED EFFECTIVE

2018 JAN -4 AM 8:52

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:
Revision Coaching 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:
2596 Stafford Cove, Ammon, ID, 83401

(Street Address)

(Mailing Address, if different)

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

Chris Rose 2596 Stafford Cove, Ammon, ID, 83401

(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:

Mindy Rose 2596 Stafford Cove, Ammon, ID, 83401

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

2596 Stafford Cove, Ammon, ID, 83401

(Address)

Signature of organizer(s).

Signature: _____

Printed Name: **Chris Rose**

Signature: _____

Printed Name: **Mindy Rose**

Printed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

01/04/2018 05:00

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