

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

JAN 13 AM 11:25

STATE OF IDAHO

1. The name of the limited liability company is:

iCoach Network, LLC

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

PO Box 1165

(Street Address)

Eagle, ID 83616

(Mailing Address, if different than street address)

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

Troy McClain

(Name)

2167 Pathfinder & Meridian, ID 83616

(Street Address)

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

Name**Address**

Troy McClain

PO Box 1165 Eagle, Id 83616

Jason Crawforth

PO Box 9307 Boise, Id 83707

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

PO Box 1165 Eagle, Id 83616

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

Typed Name:

Crystal McClain

Signature

Typed Name:

Secretary of State use only

9/10/2006/LLC form/secret. org. In PMD
Revised 07/2006

IDAHO SECRETARY OF STATE
01/13/2009 05:00
CK: 5894 CT: 233067 BH: 1152150
1 @ 100.00 = 100.00 ORGAN LLC # 2

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