



CERTIFICATE OF ORGANIZATION **FILED EFFECTIVE** LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 JUN 29 AM 8:56

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

OutcomeTools, LLC

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

PO Box 5578, Twin Falls, ID 83303

(Street Address)

1411 Falls Ave E., Suite 1203, Twin Falls, ID 83301

(Mailing Address, if different than street address)

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

John A Coleman

(Name)

401 Gooding St N., Ste201, Twin Falls, ID 83301

(Street Address)

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

Name

Address

Nathan Olsen

PO Box 5578, Twin Falls, ID 83303

Matthew Thompson

PO Box 5578, Twin Falls, ID 83303

Reuben Olsen

PO Box 5578, Twin Falls, ID 83303

Enoch Olsen

PO Box 5578, Twin Falls, ID 83303

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

PO Box 1293, Twin Falls, ID 83303-1293

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature John A Coleman

Typed Name: John A. Coleman

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
06/29/2011 05:00
CK: 1273 CT: 183315 DH: 1280419
1 @ 100.00 = 100.00 ORGAN LLC # 2

W104613