

FILED EFFECTIVE

251



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 FEB 20 PM 4:13

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

AMY STEVENS SCHEDULING, LLC

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

4252 FOREST GLEN AMMON, ID 83406

(Street Address)

(Mailing Address, if different than street address)

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

AMY STEVENS

(Name)

4252 FOREST GLEN AMMON, ID 83406

(Street Address)

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

Name

Address

AMY STEVENS

4252 FOREST GLEN AMMON, ID 83406

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

4252 FOREST GLEN AMMON, ID 83406

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: AMY STEVENS

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/21/2013 05:00
CK: 1293510 CT: 172099 BH: 1361051
1 @ 100.00 = 100.00 ORGAN LLC # 2

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