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-FILED-

File #: 0006246662

Date Filed: 5/8/2025 9:09:03 PM

Signature of Organizer.	
Signature of Organizer:	
Shanda R Heacock	7054 E ARTHUR RD ATHOL, ID 83801-5132
Name	Address
5. Governors	
☑ I affirm that the registered agent appointed has contained.	Mailing Address: 7054 E ARTHUR RD ATHOL, ID 83801-5132 onsented to serve as registered agent for this entity.
	Shanda R Heacock Physical Address: 7054 E ARTHUR RD ATHOL, ID 83801-5132
Registered Agent Name and Address Registered Agent	Registered Agent
The mailing address of the principal office is: Mailing Address	SHANDA HEACOCK 7054 E ARTHUR RD ATHOL, ID 83801-5132
The complete street address of the principal office is: Principal Office Address	SHANDA HEACOCK 7054 E. ARTHUR RD. ATHOL, ID 83801
Limited Liability Company Name Type of Limited Liability Company Entity name	Limited Liability Company SkillCraft Studio LLC
Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service descriptions below)	e (see Standard (filing fee \$100)