



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
2012 DEC 19 AM 9:18
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Aurora Consulting, LLC

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

950 Bannock Street, Ste 1100, Boise ID 83702

(Street Address)

(Mailing Address, if different than street address)

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

Rachel Harvey

(Name)

11939 W. Blueberry Ave, Nampa 83651

(Street Address)

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

Name

Address

Rachel Harvey

11939 W. Blueberry Ave, Nampa 83651

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

11939 W. Blueberry Ave, Nampa 83651

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

Signature of a manager, member or authorized person.

Signature Rachel Harvey

Typed Name: Rachel L. Harvey

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
12/19/2012 05:00
CK: 1665 CT: 277377 BH: 1352108
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