



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

11 MAY 27 AM 9:37

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Southern Idaho Camps & Clinics, LLC

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

1014 Terra Ave, Twin Falls, ID, 83301

(Street Address)

(Mailing Address, if different than street address)

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

Jason Vickrey

(Name)

1014 Terra Ave, 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

Colby Blaine

1670 W. Highland St. Boise, ID 83706

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

1014 Terra Ave, Twin Falls, ID 83301

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Jason Vickrey

Signature

Typed Name: Colby Blaine

Secretary of State use only

IDAHO SECRETARY OF STATE
05/27/2011 05:00
CK: 229 CT: 259248 BH: 1275728
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