

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2013 DEC 17 AM 10: 10

CECOETA DY DE STATE

(E ₹ O)	(Instructions on bac	k of application)	STATE OF IDAHO
1. The name	e of the limited liability co	mpany is:	
	AVEEN LLC	-	
2. The comp	plete street and mailing ac	Idresses of the initial de	esignated office:
	AD STREET, SUITE 300, BOIS	SE, ID 83702	
(Street Addre	ess)		
(Mailing Add	ress, if different than street address)		
3. The name	e and complete street add	ress of the registered a	gent:
JOHN ST	ELLMON	855 BROAD ST., #300, I	30ISE, ID 83702
(Name)		(Street Address)	
4. The name company:	e and address of at least o	one member or manage	r of the limited liability
The Object	Name		Address
	ter School Fund - Eight LLC	855 Broad St., Suite 300	, Boise, ID 83702
5. Mailing ac	dress for future correspo	ndence (annual report r	notices):
855 BRO/	AD STREET, SUITE 300, BOIS	SE, ID 83702	
6. Future eff	ective date of filing (option	nal):	
Signature of	a manager member of	r authorized	
erson.	e , ()		Secretary of State use only
Signature \\	mating all		
yped Name:	Christine Johnson, Auth. Per	rson	
ypeu maine.			
Signature	_		IDAHO SECRETARY OF STATE
orginaturo			12/17/2013 05 06

CK: 1641695 CT: 172999 BH: 1482828 1 8 100.00 = 106.00 ORGAN LLC # 8 1 8 20.00 = 28.00 EXPEDITE C # 9 W/32/22

Typed Name: