



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2017 SEP 25 PM 12:38

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the professional limited liability company is:

Utopia Counselling and Adoption Services, Professional Limited Liability Company

2. The complete street and mailing addresses of the principal office is:

1111 South Orchard Street, Suite 254, Boise, Idaho 83705

(Street Address)

2409 South Scarlet Street, Boise, Idaho 83706

(Mailing Address, if different)

3. Name and street address of registered agent in Idaho:

Elizabeth A Jackson

2409 South Scarlet Street, Boise, Idaho 83706

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

Elizabeth A Jackson

2409 South Scarlet Street, Boise, Idaho 83706

(Name)

(Address)

Richard W Jackson

922 12th Street, Rawlins, Wyoming 82301

(Name)

(Address)

(Name)

(Address)

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

2409 South Scarlet Street, Boise, Idaho 83706

(Address)

6. The limited liability company is a professional company, and the principal profession or professions for which members are duly licensed or otherwise legally authorized to render professional services is:

Social Work



7. Signature of a manager, member, or an organizer.

Printed Name: Elizabeth A Jackson

Signature: *Elizabeth A Jackson*

Printed Name: Richard W Jackson

Signature: *Richard W Jackson*

Rev. 08/2015

Secretary of State use only

IDAHO SECRETARY OF STATE

09/25/2017 05:00

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