

251

FILED EFFECTIVE

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 JAN -8 PM 4:24

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Developmental Disability Service Coordinators of Idaho, LLC

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

10880 Pixie Street, Nampa, Idaho 83687

(Street Address)

(Mailing Address, if different than street address)

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

United States Corporation Agents, Inc.
(Name)950 Bannock Street, Suite 1100, Boise, ID 83702
(Street Address)

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

Patrick Kirk

10880 Pixie Street, Nampa, Idaho 83687

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

c/o Developmental Disability Service Coordinators of Idaho, LLC, 10880 Pixie Street, Nampa, Idaho 83687

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature CMTyped Name: Cheyenne Moseley, Assistant Secretary, LegalZoom.com, Inc.

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
01/08/2015 05:00CK:2484244 CT:172099 BH:1456259
1@ 100.00 = 100.00 ORGAN LLC #2
1@ 20.00 = 20.00 EXPEDITE C #3

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