



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2013 JUN 25 AM 8:32

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Unlimited Potential Residential Habilitation Agency, LLC

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

1091 W 3rd N, Middleton ID. 83644

(Street Address)

(Mailing Address, if different than street address)

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

Merie Joan MacCallum

(Name)

1091 W 3rd N, Middleton ID. 83644

(Street Address)

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

Name

Address

Matthew Morang MacAllister

3368 N Lake Harbor Ln R203, Boise ID. 83703

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

1091 W 3rd N, Middleton ID. 83644

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Merie Joan MacCallum

Signature

Typed Name: Matthew Morang MacAllister

Secretary of State use only

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06/25/2013 05:00
CK: 2837 CT: 192480 BH: 1379590
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