



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

(Instructions on back of application)

2014 APR 24 AM 9:00

1. The name of the limited liability company is:

The Bois Quality Care SECRETARY OF STATE  
STATE OF IDAHO

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

5110 Sunderland Dr. Boise Id 83704  
(Street Address)

(Mailing Address, if different than street address)

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

Jo Ann Akins 5110 Sunderland Dr  
(Name) (Street Address) Boise Id 83704

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

Name	Address
<u>Jo Ann Akins</u>	<u>5110 Sunderland Dr Boise Id</u>
<u>Raymond Akins</u>	<u>5110 Sunderland Dr Boise Id 83704</u>
_____	_____
_____	_____
_____	_____

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

5110 Sunderland Dr Boise Id 83704

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature Jo Ann Akins  
Typed Name: Jo Ann Akins

Signature Raymond Akins  
Typed Name: Raymond Akins

Secretary of State use only

IDAHO SECRETARY OF STATE  
04/24/2014 05:00  
CK:1267 CT:296053 BH:1421722  
10 100.00 = 100.00 ORGAN LLC #2

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