

CERTIFICATE OF ORGANIZATION PROFESSIONAL

FILED EFFECTIVE

-	LIMITED LIABILIT	Y COMPAN'	Y ZOTA RUG TJ AM JOTO
	(Instructions on back	•••	SECRETARY OF SIME
1. The na	me of the professional limited	l liability company	is: STATE OF DAYO
	Deborah l	Woodall, LCSW, PLL	C
2. The co	mplete street and mailing add	resses of the initial	designated office:
	Ith St South		
	Address) a, Idaho 83651	·	
	g Address, if different than street address)		
3. The na	me and complete street addre	ess of the registered	d agent:
Debora	ah L Woodall	1950 W Carol Meridia	n Idaho 83646
(Name		(Street Address)	
liability	me and address of at least on company: <u>Name</u> ah L Woodall	e member or mana	ager of the professional limited Address n Idaho 83646
5. Mailing	address for future correspond	dence (annual repo	rt notices):
_	th St South Nampa Idaho 83651	, ,	
	effective date of filing (optiona	II): N/A	
profess	sions for which members are du sional services is: Licensed Clini	ly licensed or other	
Signature	of a manager, member or a	-	·
person.	or a managor, momber or a		
Signatura	Dogg to Albordon Ol	3451	Secretary of State use only IDANO SECRETARY OF STATE
Tunnel Mass	Denuh & Woodell Deborah L. Woodall,	1000	08/15/2014 05:00
	Deborah L. Woodall,	1	CK:1079 CT:300135 BH:1437 @ 100.00 = 100.00 PROF LI
Signature_			<u>,</u>

W41199

Typed Name: