



CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY

2013 MAR 21 AM 9:15

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Country Independent Living, LLC

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

1852 East 3900 North

(Street Address)

Buhl, Idaho 83316

(Mailing Address, if different than street address)

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

Tami Nichols

(Name)

1852 East 3900 North, Buhl, Idaho 83316

(Street Address)

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

Name

Address

Tami Nichols

1852 East 3900 North, Buhl, Idaho 83316

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

255 Blue Lakes Blvd North, PMB 710, Twin Falls, Idaho 83301

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature [Handwritten Signature]
Typed Name: Tami Nichols K. Eugene Thurston

Signature
Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
03/21/2013 05:00
CK: 1107 CT: 200924 BH: 1365700
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