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CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2011 SEP -8 PM 2:09

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

InnerSight Counseling LLC.

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

88 West Commerce Ave, Suite C. Hayden, ID 83835

(Street Address)

(Mailing Address, if different than street address)

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

All Day \$49 Idaho Registered Agent

(Name)

105 S. 6th, STE A, Coeur d'Alene ID 83814

(Street Address)

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

Name

Address

Traci L Feek

88 W. Commerce Ave, Site C, Hayden ID 83835

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

88 West Commerce Ave, Suite C. Hayden, ID 83835

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Traci L Feek

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
09/08/2011 05:00
CK: 779555 CT: 172099 BH: 1289635
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