



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

12 APR -3 PM 2:04

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

CouplesAndFamilies.Org LLC

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

3288 Pine Ave.

(Street Address)

Meridian, ID

(Mailing Address, if different than street address)

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

Michael Grigg, LMFT

(Name)

3288 Pine Ave. Meridian, ID 83642

(Street Address)

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

Name

Address

Michael Grigg, LMFT

3288 Pine Ave. Meridian, ID 83642

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

Same as above

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

Signature of a manager, member or authorized person.

Signature

Michael Grigg, LMFT

Typed Name:

MICHAEL GRIGG, LMFT

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
04/03/2012 05:00
CK: 3462 CT: 268887 BH: 1318157
I P 100.00 = 100.00 ORGAN LLC # 2

W112681

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