





STATE OF IDAHO Office of the secretary of state, Phil McGrane CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

-FILED-

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ertificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (sedescriptions below)	ee Standard (filing fee \$100)
Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	Authentic Expressions Counseling, LLC
The complete street address of the principal office is:	
Principal Office Address	DANIELLE LOUIE
	106 E BOISE AVE
	APT 201 BOISE, ID 83706
	BOISE, ID 03700
The mailing address of the principal office is:	DANIELLELOLIE
Mailing Address	DANIELLE LOUIE 106 E BOISE AVE
	APT 201
	BOISE, ID 83706-4310
Registered Agent Name and Address	
Registered Agent	Registered Agent
	Danielle R Louie
	Physical Address:
	DANIELLE LOUIE 106 E BOISE AVE
	APT 201
	BOISE, ID 83706
	Mailing Address:
	DANIELLE LOUIE
	106 E BOISE AVE
	APT 201 BOISE, ID 83706-4310
I affirm that the registered agent appointed has conse	
Name	Address
106 APT	PANIELLE LOUIE
	06 E BOISE AVE
	NPT 201
E	BOISE, ID 83706
ignature of Organizer:	

Danielle R. Louie

Sign Here

03/06/2023

Date