

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2009 FEB 27 AM 10:45

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Expressions Supportive Services LLC

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

1076 S. Yellowstone Hwy Saint Anthony, ID 83445

(Street Address)

(Mailing Address, if different than street address)

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

June Nelson-Cox

(Name)

1076 S. Yellowstone Hwy Saint Anthony, ID 83445

(Street Address)

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

NameAddress

June Nelson-Cox

1076 S. Yellowstone Hwy Saint Anthony, ID 83445

James Huml

1076 S. Yellowstone Hwy Saint Anthony, ID 83445

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

1076 S. Yellowstone Hwy Saint Anthony, ID 83445

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

K Walsh

Typed Name:

KERRY WALSH

Signature

Typed Name:

Secretary of State use only

 IDAHO SECRETARY OF STATE
 02/27/2009 05:00
 CK: NONE CT: 145271 DN: 1158908
 1 @ 100.00 = 100.00 ORGAN LLC # 2

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