251

Rev. 11/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

SECRETARY OF STATE

2016 JUL 25 AM 10: 20

Complete and submit the application in duplicate

Complete and submit the application in <u>duplicate</u> .		F STATE OF IDAHO
The name of the limited liab Reverse Alzheimers.LLC	ility company is:	
	words "Limited Liability Company."	Limited Company." or the abbreviations L.L.C., LLC, or LC)
The complete street and ma	•	cipal office is:
(Street Address)		e determinant de la companya de la c
(Mailing Address, if different)		
The name of the registered	agent and the street addre	ess of the registered agent:
Louis Rigoulot III	103 Halley #15, Sandpoint, ID 83864-3015	
(Name)	(Address cannot be a post office box or postal mail box.)	
The name and address of a	t least one governor of the	limited liability company:
Louis Rigoulot III	103 Halley #15, Sandpoint, ID 83864-3015	
(Name)	(Address)	
(Name)		
(tvatica)	(Address)	
(Name)	(Address)	
(Name)	(Address)	
Mailing address for future co	•	port notices):
(Address)		
ature of organizer(s).	1. —	
ature:		Secretary of State use only
ed Name: Louis Rigoulot III		IDAHO SECRETARY OF STATE 07/25/2016 05:00 CK:17434870681 CT:222184 BH:15390
ature:		1@ 100.00 = 100.00 ORGAN LLC #2
ed Name:		W1/69581