



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2014 MAR 21 AM 8:50

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

LATINO COMMUNITY SERVICE CENTER LLC

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

109 14TH AVE SOUTH NAMPA ID 83651

(Street Address)

(Mailing Address, if different than street address)

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

ANA PAOLA QUEZADA

(Name)

109 14TH AVE SOUTH NAMPA ID 83651

(Street Address)

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

Name

Address

ANA PAOLA QUEZADA

109 14TH AVE SOUTH NAMPA ID 83651

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

109 14th ave S Nampa ID 83651

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: ANA PAOLA QUEZADA

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
03/21/2014 05:00
CK: 1214 CT: 294671 BH: 1416511
1 @ 100.00 = 100.00 ORGAN LLC # 2

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