

Signature: _

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in duplicate. 2016 DEC 30 PM 2: 01

SECRETARY OF STATE STATE OF IDAHO

	Complete and Submit to	ile abbitograpii iii <u>aubite</u>	STATE OF IDAHO
1.	The name of the professional limited liability company is:		
	GEIANNE CHOATE LCPC NCC, PLLC		
2.	The complete street and mailing addresses of the principal office is:		
	3646 N 900 E CASTLEFORD, IDAHO 83321		
	(Street Address)		
	(Mailing Address, if different)		
3.	Name and street address of registered agent in Idaho:		
	GEIANNE BLICK CHOATE 3646 N 900 E CASTLEFORD, IDAHO 83321		CASTLEFORD, IDAHO 83321
	(Name)	(Address)	
4.	The name and address of at least one governor of the limited liability company:		
	GEIANNE BLICK CHOATE	3646 N 900 E CASTLEFORD, IDAHO 83321	
	(Name)	(Address)	
	(Name)		
	(in the second of the second	(Address)	
	(Name)	(Address)	
5.	Mailing address for future correspondence (annual report notices):		
	3646 N 900 E CASTLEFORD, IDAHO 83321		
	(Address)		
6.	The limited liability company is a professional company, and the principal profession or professions for which members ar duly licensed or otherwise legally authorized to render professional services is:		
	Social Work		
7		,	Secretary of State use only
7.	Signature of a manager, member, o	or an organizer. <i>O</i>	
Printed Name: STEVEN A. FETELSON			IDAHO SECRETARY OF STATE
Printed Name: STEVEN 1. LETERSON Signature: O. Rether			12/30/2016 05:00 CK:4462940 CT:172099 BH:1561753
Sig	nature: AWW O. P.	276-	16 100.00 = 100.00 PROF LLC #2
Рri	nted Name:		
			W176219

Rev. 08/2015