CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE 2018 JAN - 3 PM 12: 28

Title 30, Chapters 21 and 25, Idaho Code

SECRETARY OF STATE STATE OF IDAHO

Filing fee: \$100 typed, \$120 not typed Complete and submit the application in duplicate.

The name of the professional limited	d liability company is:
Pioneer Behavioral Health Se	rvices LLC
The complete street and mailing add 2097 W. Fieldstream Dr. Meri	
(Street Address)	
(Mailing Address, if different)	
Name and street address of register	red agent <u>in Idaho</u> :
Kristi Olson	2097 W. Fieldstream Dr. Meridian, ID 83646
(Name)	(Address)
The name and address of at least o	one governor of the limited liability company:
Kristi Olson	2097 W. Fieldstream Dr. Meridian, ID 83646
(Name)	(Address)
Chrisean Christopher	1411 S. Goldking Way #107 Boise, ID 83709
(Name)	(Address)
(Name)	(Address)
Mailing address for future correspor	ndence (annual report notices):
2097 W. Fieldstream Dr. Merid	dian, ID 83646
(Address)	
	ofessional company, and the principal profession or professions for which members are uthorized to render professional services is:
Social Work	
	Secretary of State use only
Signature of a manager, member	

Printed Name:

Kristi Olson

Signature

Printed Name:

Signature: .

Chrisean Christopher

IDAHO SECRETARY OF STATE 01/03/2018 05:00

CK:3206 CT:242532 BH:1619216 16 100.00 = 100.00 PROF LLC #2

W194280

Rev. 11/2017