



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2011 OCT -6 PM 12: 46

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Absolute Drug Testing, LLC

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

5514 Pinegrove Drive

(Street Address)

Coeur d'Alene, ID 83815

(Mailing Address, if different than street address)

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

Holt Law Office, PLLC

(Name)

618 N 4th Street, Coeur d'Alene, ID 83815

(Street Address)

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

Name

Charles D. Jett, Jr.

Address

5514 Pinegrove Drive, Coeur d'Alene, ID 83815

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

5514 Pinegrove Drive, Coeur d'Alene, ID 83815

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: Kevin P. Holt

Secretary of State use only

Signature

Typed Name: _____

WJD734