

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 NOV -4 AM 8: 37

SECHE/ARY	OF STATE
STATE OF	IDAHO

1. The name of the limited liability co	ompany is: SIAIE OF ID/	AHO
Loving Care &	& More Personal Care Services, LLC	
2. The complete street and mailing a	addresses of the initial designated/principal office	ce:
104 Wind	driver Rd., Silverton, ID 83867	
(Street Address)	Box 2065, Osbum, ID 83849	
(Mailing Address, if different than street address)		
3. The name and complete street add	ldress of the registered agent:	
Marcy Hayman	1233 E. Larch, Osburn, ID 83849	
(Name)	(Street Address)	· · · · · · · · · · · · · · · · · · ·
4. The name and address of at least company: Name	t one member or manager of the limited liability Address	
Marcy Hayman	P.O. Box 2065, Osburn, ID 83849	
		re-risidor didir D- Dró
		
		· <u>#</u>
5. Mailing address for future correspo	ondence (annual report notices):	•
· · · · · · · · · · · · · · · · · · ·	Box 2065, Osburn, ID 83849	
		
Future effective date of filing (option)	onal):	
		a "
Signature of organizer(s). (An organizer is	s a member, or is	
acting in behalf of a member or members).	Secretary of State use only	
Signature YVL Group Jay W	nau d	
Typed Name: Marcy Hayman	IDAHO SECRETARY 1 1/04/2009 CK: 2184 CT: 241982 1 1 8 188 68 = 188 88	
0	IDAHO SECRETARY	OF STATE
Signature	CK: 21861 CT: 241962	변경 : 변경 매: 11948
Typed Name:	E	UKUFIN LLC #

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