

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY -6 A 9 05

(Instructions on back of application) STATE OF STATE

1.	The name of the limited liability compa	any is:
	SARA HILL, LCSW, LLC	
2.	The street address of the initial registered office is:	
	760 W HARCOURT RD BOISE, ID	83702
	and the name of the initial registered a	gent at the above address is:
	SARA HILL	
3.	The mailing address for future corresp	ondence is:
	760 W HARCOURT RD BOISE, ID	83702
4.	Management of the limited liability con	npany will be vested in:
	Manager(s) or Member(s)	(please check the appropriate box)
_	-	or more manager(s) list the name(s) and
5.	If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the	
	member(s), list the name(s) and addre	ess(es) of at least one initial member.
	Name	Address
	SARA HILL	760 W HARCOURT RD BOISE, ID 83702
		anneible for forming the limited lightlity company:
6.	Signature of at least one person response	onsible for forming the limited liability company:
6.	Signature: San Hell	Consider of Chile year only
6.	Signature of at least one person responsion for the second	Consider of Chile was only
6.	Signature: SARA HILL Capacity: MANAGER	December of State was prive
6.	Signature: SARA HILL Capacity: MANAGER Signature	December of State was prive
6.	Signature: SARA HILL Capacity: MANAGER	Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE OB/06/2004 05:00 CK: 1002 CT: 181276 BH: 759428

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