

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 OCT -3 AM 8: 56

1. The na	me of the limited liability o	ompany los	OF ORDINARY CONTROL	
 The name of the limited liability com C & C Therapy Services LLC 		отпратту 15.	SECRETARY OF STATE STATE OF IDAHO	
2. The co	mplete street and mailing a V. Robison, Hayden, ID 83835	addresses of the initia		
(Mailing	Address, if different than street address)	<u> </u>	
3. The na	The name and complete street address of the registered agent:			
Colleen Riedle (Name)		3696 W. Robison, F	layden, ID 83835	
4. The na compa	me and address of at least ny:	one member or mar	nager of the limited liability	
0.0	Name .		Address	
Colleei	n Riedle	3696 W. Robison, Hayden, ID 83835 3696 W. Robison, Hayden, ID 83835		
Chris [). Riedle			
	address for future correspo /. Robison, Hayden, ID 83835	ondence (annual rep	ort notices):	
6. Future	effective date of filing (option	onal):		
Signature of person.	of a manager, member o	or authorized		
Signature <u>(</u> Typed Nam	Colleen Riedle		Secretary of State use only	
Signature	The Skeet	4,	IDAHO SECRETARY OF STATE 19/93/2913 95:99 CK: 26821 CT: 283524 RM: 139241	
Typed Name	Chris D. Riedle		1 # 199.90 = 199.90 ORGAN LLC # 2	

W129824

Typed Name: Chris D. Riedle