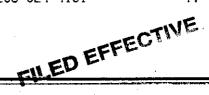
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## CERTIFICATE OF ORGANIZATION JUL -9 PM 4: 27 LIMITED LIABILITY COMPANY SECRETARY OF STATE OF IDAHO

O.L.	(Instructions on bac	k of application)	SIMIL OF IDATIO	
The na	me of the limited liability co	ompany is:		
	Correctional N	ledical Educational Associa	ites LLC	
	mplete street address, and al office:	mailing address if diffe	rent, of the initial designated/	
	365 W Spring N	leadow Dr. Idaho Falls, Ida	ho 83404	
	e name of the commercial registered agent; or the name and complete street dress of the non-commercial registered agent:			
<u></u>	Jeff Keller 365 W Sp	ring Meadow Dr. Idaho Fall	s, Idaho 83404	
Th	me and address of at least	one member or manage	ser of the limited liability	
. The na compa		OUR HEHING! OF HIGHE	Address	
	Name Laff Kallas	266 M Carina Monde	365 W Spring Meadow Dr. Idaho Falls, Idaho 83404	
	Jeff Keller			
<del> </del>	Angela Keller	365 W Spring Meado	ow Dr. Idaho Falls, Idaho 83404	
. <b>Mailing</b>	address for future corresp	ondence (annual repor	t notices):	
•		Meadow Dr. Idaho Falls, Ida		
6. Future	effective date of filing (opti	ona!):		
. ,	#			
iignature o r is acting in	of an organizer(s). (An organi behalf of a required, and existin	zer is a member, a. initial member		
r members)			Secretary of State use only	
	970	P. P	•	
Signature	Larren K. Covert, I	Esa.		
yped Nan	ile. <u>Carren 14. Covert, 1</u>	8002.	IDAHO SECRETARY OF STA	
Signature_		sed D7	07/09/2008 05 CK: 138277 CT: 172099 BH:	
yped Nan	ne'	Res	1 2 108.08 = 100.00 ORGAN 1 2 26.00 = 20.00 EXPEDI	

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