

FILED EFFECTIVE



# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2005 FEB -3 AM 8:41

STATE OF IDAHO

1. The name of the limited liability company is:

CAMAS PROFESSIONAL COUNSELING, L.L.C.

2. The street address of the initial registered office is:

504 King Street, Suite 1, Cottonwood, Idaho 83522

and the name of the initial registered agent at the above address is:

Brit Groom, Attorney at Law

3. The mailing address for future correspondence is:

P.O. Box 227, Cottonwood, Idaho 83522

4. Management of the limited liability company will be vested in:

Manager(s) ☐ or Member(s) ☒ (please check the appropriate box)

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 address(es) of at least one initial member.

Name

Address

Ms. Tammy EversonRR1, Box 213E, Cottonwood, Idaho 83522

6. Signature of at least one person responsible for forming the limited liability company:

Signature: Tammy EversonTyped Name: Ms. Tammy EversonCapacity: Member

Signature: \_\_\_\_\_

Typed Name: \_\_\_\_\_

Capacity: \_\_\_\_\_

Secretary of State use only

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02/03/2005 05:00  
CX: 1848 CT: 185778 BH: 790873  
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