



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2017 OCT 25 AM 9:05

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:
SANDOVAL THERAPY SERVICES, LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:
364 8TH STREET, IDAHO FALLS, ID 83401

(Street Address)

SAME

(Mailing Address, if different)

3. The name of the registered agent and the street address of the registered agent:

SARAH SANDOVAL

364 8TH STREET, IDAHO FALLS, ID 83401

(Name)

(Address cannot be a post office box or postal mail box.)

4. The name and address of at least one governor of the limited liability company:

SARAH SANDOVAL

364 8TH STREET, IDAHO FALLS, ID 83401

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):

364 8TH STREET, IDAHO FALLS, ID 83401

(Address)

Signature of organizer(s).

Signature: *Sarah Sandoval*

Printed Name: SARAH SANDOVAL

Signature: _____

Printed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

10/25/2017 05:00

CK:1245 CT:347500 BH:1608956

1@ 100.00 = 100.00 ORGAN LLC #2

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