



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE

09 JUN 17 AM 8:43

SECRETARY OF STATE
STATE OF IDAHO

(Instructions on back of application)

1. The name of the professional limited liability company is:

Adams Center for Counseling, PLLC

2. The complete street and mailing addresses of the initial designated/principal office:

13150 W. Persimmon Lane

(Street Address)

Boise, Idaho 83713

(Mailing Address, if different than street address)

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

Randall W. Adams

596 W. Oakhampton Drive Eagle, Idaho 83616

(Name)

(Street Address)

4. The name and address of at least one member or manager of the professional limited liability company:

Name

Address

Jyl Adams

13150 W. Persimmon Lane, Boise, Idaho 83713

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

596 W. Oakhampton Drive, Eagle, Idaho 83616

6. Future effective date of filing (optional):

7. The limited liability company is a professional company, and the principal profession or professions for which members are duly licensed or otherwise legally authorized to render professional services is: Licensed Clinical Social Worker

Signature of an organizer(s). (An organizer is a member, or is acting in behalf of a required, and existing, initial member or members).

Signature Jyl Adams

Typed Name: Jyl Adams

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
06/17/2009 05:00
CK: 1566 CT: 230847 BH: 1175092
1 @ 100.00 = 100.00 PROF LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

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