FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

	(Instructions on back	c of application)	S/A 200 AM 9: 1
1.	The name of the limited liability co	mpany is:	1 OF OF OF 18 14 1
	Sunny Day Childre		ANO NE
2.	2. The complete street and mailing addresses of the initial designated office:		
	1023 S. Curko R1	Boise II 83705	54 511100.
		Balse, Id 83755	
3.	3. The name and complete street address of the registered agent:		
	Jennifer Masitis (Name)	(Street Address) Ragleson Rd	Borse, Id 83705
4.	4. The name and address of at least one member or manager of the limited liability company:		
	Name	Address	
	Jennifer Masitis	608 S. Eagleson Rd	Baisie, Id 83705
	-		
5. Mailing address for future correspondence (annual report notices):			
	COOR S. Eagleson Rd B	oise, Id 83705	
6. Future effective date of filing (optional):			
Sigr pers	ature of a manager, member or	authorized	
•	A	Secretar	y of State use only
Signature Jennester Wasitus			
Туре	d Name: <u>Jenhifer Mositis</u>	<u> </u>	
Sian	ature	ID	AHO SECRETARY OF STATE
	atured Name:		19/2012 05:00 7 CT: 219687 BH: 1348138 98 = 188.88 ORGAN LLC # 2
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