

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in duplicate.

2018 FEB - 1 AM 8: 11

SECRETARY OF STATE

1.	The name of the professional limited liability company is: AMS Counseling, LLC		STATE OF IDAHO	
2.	The complete street and mailing addresses of the principal office is: 17 12th Ave S Ste 207, Nampa, ID 83651			
	(Street Address)			
	(Mailing Address, if different)			
3.	Name and street address of registered agent in Idaho: Alicia May-Su 3535 S. Big Lost Ct., Nampa, iD 83686			
	(Name)	(Address)		
4.	The name and address of at least one governor of the limited liability company: Alicia May-Su 3535 S. Big Lost Ct. Nampa, ID 83686 (Name)			
	(Marie)	(Address)		
	(Name)	(Address)		
	(Name)	(Address)		
5.	Mailing address for future correspondence (annual report notices): 3535 S. Big Lost Ct. Nampa, ID 83686			
	(Address)			
6.	The limited liability company is a professional company, and the principal profession or professions for which members and duly licensed or otherwise legally authorized to render professional services is:			
	Social Work			
		Γ	Secretary of State use only	
7	Signature of a manager, mer	mher or an organizer	TOIUS SECRETARIAN AN ANTMO	

Alicia May-Su, LCSW

Printed Name:

Signature:

Printed Name:

Signature: Rev. 11/2017 W196091

IDAHO SECRETARY OF STATE 02/01/2018 05:00

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