



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 APR 10 PM 4:26

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Insight Support Groups, LLC

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

1888 Shaw Mountain Rd. BOISE ID 83712

(Street Address)

(Mailing Address, if different than street address)

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

Karolyn Crowley

(Name)

1888 Shaw Mountain Rd.

(Street Address)

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

Name

Address

Karolyn Crowley

1888 Shaw Mountain Rd.

BOISE ID 83712

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

1888 Shaw Mountain Rd. BOISE ID 83712

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Karolyn Crowley

Typed Name: Karolyn Crowley

Signature _____

Typed Name: _____

Secretary of State use only

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04/10/2014 05:00
CK: 1805330 CT: 172099 BH: 1419716
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