



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 JUL 20 AM 9:18

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:

Be Well Mental Health Counseling 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:

1205 Hwy 2, Suite 301, Sandpoint, ID 83864

(Street address)

(Mailing address, if different)

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

Michelle Woodward

13178 W Pine St., Sandpoint, ID 83864

(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:

Michelle Woodward

13178 W Pine St., Sandpoint, ID 83864

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

13178 W Pine St., Sandpoint, ID 83864

(Mailing address)

Signature of organizer(s).

Signature: Michelle A. Woodward

Printed Name: Michelle A Woodward

Signature: _____

Printed Name: _____

Secretary of State use only

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07/20/2017 05:00

CK:1108 CT:342883 BH:1594375

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