



# **CERTIFICATE OF ORGANIZATION FILED EFFECTIVE** **LIMITED LIABILITY COMPANY**

JUN 27 PM 1:32

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

COTTAGES ASSISTED LIVING OF MOUNTAIN HOME, LLC

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

1079 S. ANCONA AVE. #110; EAGLE, ID 83616

(Street Address)

SAME

(Mailing Address, if different than street address)

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

GAROLD MAXFIELD

(Name)

1079 S. ANCONA AVE. #110; EAGLE, ID 83616

(Street Address)

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

NameAddress

GAROLD MAXFIELD

1079 S. ANCONA AVE. #110; EAGLE, ID 83616

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

1079 S. ANCONA AVE. #110; EAGLE, ID 83616

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: GAROLD MAXFIELD

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

06/27/2014 05:00

CK:5267 CT:115176 BH:1431119

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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