

FILED EFFECTIVE



# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

 NOV 11 2004 1 PM 2:27  
 SECRETARY OF STATE  
 STATE OF IDAHO

(Instructions on back of application)

1. The name of the limited liability company is:

ADVOCATES FOR YOU, LLC

If the LLC has been administratively dissolved and the name is no longer available for use, #3 below must include an amendment of name.

2. The date the articles of organization were filed was: 9/11/97

## COMPLETE ONLY THE APPLICABLE ITEMS

3. The name of the limited liability company is amended to read:

4. The management of the limited liability company shall henceforth be vested in:

☐ Manager(s) ☒ Members

5. The information on the managers/members shall be amended as follows:

Name	Address	Add	Delete	Other
Jolene Krahenbuhl	709 Sherry Road, Nampa, Ida 83686	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Karleen Lemmon	5420 Lewis Lane, Nampa, Ida 83686	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Stacey Garza	5420 Lewis Lane, Nampa, Ida 83686	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Larry Barrett	1004 7th St. So., Nampa, Ida 83651	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Maureen O'Donnell	2315 E. Amity Ave., Nampa, Ida 83686	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

6. Signature of at least one manager, if any, or at least one member.

Signature: Jolene Krahenbuhl

Typed Name: Jolene Krahenbuhl

Capacity: Administrator/Owner

Signature: \_\_\_\_\_

Typed Name: \_\_\_\_\_

Capacity: \_\_\_\_\_

Secretary of State use only

 IDAHO SECRETARY OF STATE  
 11/01/2004 05:00  
 CK: 1568 CT: 145493 BH: 774279  
 1 @ 30.00 = 30.00 ORGAN AMEN # 2

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Name	Address	Add	Delete	Other
continued....		<input type="checkbox"/>	<input type="checkbox"/>	
Ed Naff	2315 E. Amity Ave., Nampa, Ida 83686	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Kathryn Shoemaker	2315 E. Amity Ave., Nampa, Ida 83686	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	

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Signature: Jolene Krahenbuhl

Typed Name: Jolene Krahenbuhl

Capacity: Administrator/Owner

Signature: \_\_\_\_\_

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Capacity: \_\_\_\_\_

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Page 2 of 2