FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

	(Instructions on back of application)	2013 FEB 25 PM 1: 09	
		SECRETARY OF STATE	
1.	The name of the limited liability company is:	STATE OF IDAHO	
	IRANQUILITY COUNSELING S	ERVICE, LLC	
2.	The complete street and mailing addresses of the initial	· ·	
2704 N. CARIBON WAY, MERIDIAN ID. 830		TERIDIAN ID. 83646	
	(Street Address)		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent		
	Michael Gallegos 2704 N. (Street Address)	CARIBOU WAY meridian Id.	
	(Name) (Street Address)	83644	
4. The name and address of at least one member or manager of the limited liability company:		nager of the limited liability	
	Name	Address	
	Michell Gallegos 2704 N. CA	1. CARIBOU IDAY MERICIAN Id	
	Leff Gallegos 2704 N. CA	ARIBOU WAY, meridian Id	
	J	830.00	
			
5.	Mailing address for future correspondence (annual rep	ort notices):	
	2704 N. CARIBOU Way merid	Ian Tal 83646	
6.	6. Future effective date of filing (optional):		
_	nature of a manager, member or authorized		
pers	person. Secretary of State use only		
Sigi	hature Mcdd Mallege		
_	ed Name: Michael Gallesos		
Sigi	nature	IDAHO SECRETARY OF STATE 02/25/2013 05:00	
Typed Name:		CK: 1033 CT: 217294 BH: 1361676 1 0 100.00 = 100.00 ORGAN LLC # 2	