



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

11 NOV 15 AM 8:45

1. The name of the limited liability company is:

Family Services Treatment, LLC

SECRETARY OF STATE
STATE OF IDAHO

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

426 Highway 16 Emmett, Idaho 83617

(Street Address)

P.O. Box 981 Emmett, Idaho 83617

(Mailing Address, if different than street address)

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

Robert Horton

(Name)

426 Highway 16 Emmett, Idaho 83617

(Street Address)

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

Name

Address

Robert Horton

817 SW 2nd Avenue NE Payette, Idaho 83661

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

P.O. Box 981 Emmett, Idaho 83617

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Robert Horton

Typed Name: Robert Horton

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
11/15/2011 05:00
CK: 794 CT: 264166 BH: 1298130
1 @ 100.00 = 100.00 ORGAN LLC # 2

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