

State of Idaho

Office of the Secretary of State

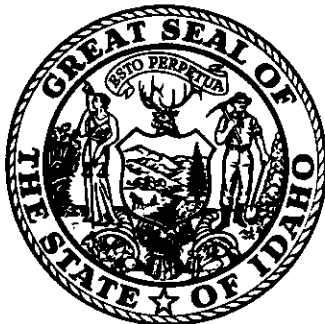
**CERTIFICATE OF AUTHORITY
OF
COMMUNITY MENTAL HEALTH SERVICES INC.**

File Number C 193534

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Business Corporation Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: January 26, 2012



Ben Yursa
SECRETARY OF STATE

By *Sheryl Bertner*

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APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

2012 JAN 26 PM 2:05

SECRETARY OF STATE
STATE OF IDAHO

The undersigned Corporation applies for a Certificate of Authority and states as follows:

- The name of the corporation is:
Community Mental Health Services Inc.
- The name which it shall use in Idaho is: _____
- It is incorporated under the laws of: Wyoming
- Its date of incorporation is: 04/30/2009
- The address of its principal office is:
720 E Lander str pocatello, ID 83201 USA
- The address to which correspondence should be addressed, if different from item 5, is:

- The street address of its registered office in Idaho is: 720 E Lander str pocatello, ID 83201 USA
and its registered agent in Idaho at that address is: Steed Martin
- The names and respective business addresses of its directors and officers are:

Name	Title	Business Address
<u>Steed Martin</u>	<u>Director/Pres</u>	<u>720 E Lander str Pocatello, ID</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dated: 1/26/2012

Signature: _____

Typed Name: Steed MartinCapacity: Director

(The signor must be a director or an officer of the corporation.)

Customer Acct # :

(If using prepaid account)

Secretary of State use only

 Application
 Completed
 1/26/2012
 10:00 AM
 1/26/2012
 10:00 AM

Web Form

 IDAHO SECRETARY OF STATE
 01/26/2012 05:00
 CK: 887288 CT: 172899 BH: 1387888
 1 @ 100.00 = 100.00 AUTH PRO # 2
 1 @ 20.00 = 20.00 EXPEDITE C # 3

c193534

STATE OF WYOMING
Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Community Mental Health Services Inc.

is a

Profit Corporation

formed or qualified under the laws of Wyoming did on April 30, 2009, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity Identification number 2009-000569155.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 26th day of January, 2012 at 10:36 AM. This certificate is assigned 011487529.




Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website <http://wyoblz.wy.gov> and following the instructions displayed under Validate Certificate.