

Rev. 11/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2017 OCT 18 AM 100 03

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

SECRETARY

	Complete and submit the application in <u>duplicate</u> .			STATE OF IDAHO	
1.	The name of the limited liability company is:			· · · · · · · · · · · · · · · · · · ·	
	Hills' Helping Hands LLC				
	(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC.			L.L.C., LLC, or LC)	
2.	The complete street and mailing addresses of the principal office is:				
	6700 Overland Road, Boise, ID 83709 (Street Address)				
	6700 Overland Road, Boise, ID 83709				
	(Mailing Address, if different)				
3.	The name of the registered agent and the street address of the registered agent:				
	Joshua Hill	6700 Overland			
	(Name)	(Address cannot be a p	(Address cannot be a post office box or postal mail box.)		
4.	The name and address of at least one governor of the limited liability company:				
	Joshua Hill	6700 Overland Road, Boise, ID 83709			
	(Name)	(Address)			
	(Name)	(Address)			
	(Name)	(Address)			
	(Name)	(Address)			
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5.	Mailing address for future correspondence (annual report notices): 6700 Overland, Boise, ID 83709				
	(Address)	J 637 08			
	, ,				
Sig	nature of organizer(s).	3			
Sia	nature:		Secretary of State use or	aly	
Prir	nted Name: Joshua Hill		i	TARY OF STATE	
O:			· · · · · · · · · · · · · · · · · · ·	117 05:00 197 BH:1607900	
Sig	nature:			.00 ORGAN LLC #2	
Prin	nted Name:				

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