

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

(Instructions on back of application)

2012 SEP 21 AM 11: 34

1. The name of the limited liability compan	y is: SECRETARY OF STATE
Jane Duke, LCPC	Counseling LISTATE OF IDAHO
2. The complete street and mailing address	i i
(Street Address)	te 306 Boise Idaho 83703
(Mailing Address, if different than street address)	ay, Boise Idaho 83714
3. The name and complete street address	of the registered agent:
Jane Duke 6 (Str	126 W. State St, Ste 306 reet Address) Boise, Idaho 83703
The name and address of at least one monomore.	nember or manager of the limited liability
<u>Name</u>	Address
Jane Duke 10	257 N. Parisades Way
	3015e, Idaho 83714
E. Mailing address for fature corresponden	oo (onnual roport notions):
5. Mailing address for future correspondent 10257 N. Pausades	·
10037 14: 100 Sques	way wise started 83F14
6. Future effective date of filing (optional):	
Signature of a manager, member or autiperson.	norized
·	Secretary of State use only
Signature <u>Oyune Aharer De</u> Typed Name: <u>Jane & Sharer</u>	eke
Typed Name: U Jane Shaver?	<u>Duke</u>
Signature	IDANO SECRETARY OF STATE
Tyned Name:	09/21/2012 05:00 CK: 3815 CT: 274525 BH: 1340765

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