





STATE OF IDAHO

Office of the secretary of state, Lawerence Denney CERTIFICATE OF ORGANIZATION LIMITED

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301

LIABILITY COMPANY

(208) 334-2301 Filing Fee: \$100.00 For Office Use Only

-FILED-

File #: 0004921796

Date

Date Filed: 10/13/2022 4:15:47 PM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day S descriptions below)	Service (see Standard (filing fee \$100)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	FAMILY CENTER OF NORTH LAKES LLC
2. The complete street address of the principal office is:	
Principal Office Address	611 LAKESIDE AVENUE
	COEUR D'ALENE, ID 83814
3. The mailing address of the principal office is:	
Mailing Address	611 E LAKESIDE AVE
	COEUR D ALENE, ID 83814-2840
4. Registered Agent Name and Address	
Registered Agent	Registered Agent
	JAMIE DUMAN
	Physical Address: 8245 N CORNERSTONE DR
	HAYDEN, ID 83835
	Mailing Address:
	8245 N CORNERSTONE DR
	HAYDEN, ID 83835-8683
I affirm that the registered agent appointed h	nas consented to serve as registered agent for this entity.
5. Governors	
Name	Address
CATHLEEN MARCEAU	5708 PARKWOOD
	COEUR D'ALENE, ID 83814
Signature of Organizer:	
organization organization	

Sign Here