

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 10 JAN 21 AM 8: 49

(Instructions on back of application)

SECHETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability compa	any is: STATE OF IDAHO	
	Sherry's Helping Hands, LLC		
2.	The complete street and mailing addresses of the initial designated/principal office:		
	11474 W. Sandra Lee Drive, Rathdrum, ID 83858		
	(Street Address) PO Box 348, Rathdrum, ID 83858		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Scott L. Poorman	8884 N. Government Way, Suite E, Hayden, ID 83835	
	_	(Street Address)	
4.	company:		
	Name	Address	
	Sherry Saffeels	PO Box 348, Rathdrum, ID 83858	
5.	Mailing address for future correspondence (annual report notices):		
	PO Box 34	48, Rathdrum, ID 83858	
6.	Future effective date of filing (optional	l):	
Signature of organizer(s). (An organizer is a member, or is			
act	ing in behalf of a member or members).	Secretary of State use only	
Signature term to been \$			
Ту	ped Name:Sherry Saffeels V	IDAHO SECRETARY OF STATE  21/21/2010 05 = 00  CK: 29% CT: 69601 BH: 1284364  1 9 100.00 = 100.00 ORGAN ILC 1	
		IDANO SECRETARY OF STATE	
	Signature 51/21/2010 05:00 CK: 29% CT: 63691 BH: 1284364		
Τу	ped Name:	T A TAN DE SE MURAN ITC #	

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