



Reset Form



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typed)

For Office Use Only

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1. The name of the professional limited liability company is:

Larkspur Mental Health Counseling, PLLC

2. The complete street and mailing addresses of the principal office is:

316 S Jefferson St, Moscow, ID 83843

3. Name and street address of registered agent in Idaho:

EDUCATIONAL AND PSYCHOLOGICAL SERVICES, A P.L.L.C.

316 S Jefferson St, Moscow, ID 83843

4. The name and address of at least one governor of the limited liability company:

Heather M. Lannigan 5601 Airport Rd, Pullman, WA 99163

5. Mailing address for future correspondence (annual report notices):

5601 Airport Rd, Pullman, WA 99163

6. The limited liability company is a professional company, and the principal profession or professions for which members are duly licensed or otherwise legally authorized to render professional services is:

Social Work

7. Signature of a manager, member, or an organizer.

Printed Name: Heather M. Lannigan

Signature: Heather M. Lannigan

Printed Name: _____

Signature: _____

Secretary of State use only

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