FILED

251

Signature_____
Typed Name:

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

STATE OF IDAHO

	LIMITED LIAB	ILITY COMPANY STATE OF IDAH
35	(Instructions on	back of application)
. The name	e of the limited liability Emmett Co	y company is: ounseling and Psychiatric Services, LLC
711 1/2 E	. Third, Emmett, ID 83617	g addresses of the initial designated/principal office:
(Street Addi		
	ress. If different than street each and complete street	address of the registered agent:
Michael S	. Lee	2007 E. Queil Run Road, Emmett, ID 83617
(Name)		(Street Address)
Michael S.	Name Lee	Address 2007 E. Quali Run Road, Emmett, ID 83617
-	dress for future corres ail Run Road, Emmett, ID	epondence (annual report notices): 83617
Future effe	ctive date of filing (op	tional); December 1, 2010
-	a manager, member	or authorized
rson.	0. 100	Secretary of State use only
pature ped Name:	Michael S. Lee	No.
•	7	

IDAHO SECRETARY OF STATE
11/16/2010 05:00
CK: 15166 CT: 214448 BH: 1247311
1 0 100.00 = 100.00 ORGAN LLC # 2

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