

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY 07 NOV 19 PM 1: 29

(Instructions on back of application)

FILED EFFE SECRETARY OF STATE

1.	The name of the limited liability com	state of IDAHO
	Koloski Counseling, LLC	
2.	The street address of the initial regis	·
	and the name of the initial registered	I agent at the above address is:
3.	The mailing address for future corre- 6604 Fairfield Ave., Boise, ID 8370	
4.	The limited liability company will be:	
	Manager-managed or Membe	r-managed (please check the appropriate box)
5.	If manager-managed, list the name(s) If member-managed, list the name(s)	(s) and address(es) of at least one initial manager. s) and address(es) of at least one initial member.
	<u>Name</u>	Address
	Ingri Koloski	6604 Fairfield Ave., Boise, ID 83709
6.	Signature of at least one person res	sponsible for forming the limited liability company:
	Signature: William Kalaski	Secretary of State use only
	Typed Name: Angri Koloski Capacity: Manager/ Owner	
	1 Sharity, Midiadon Omino	
	Capacity.	8
		IDAHO SECRETARY OF STATE
	Signature Typed Name:	92 11/20/200/ 05:0