

## ARTICLES OF ORGANIZATION FILED EFFECTIVE PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

2005 DEC 14 AM 9: 20

SECRETARY OF STATE

1.	The name of the professional limited liability co	
2.	The professional LLC is organized for the practice.	ctice in the profession of: Psychology
3.	The address of the initial registered office is:	1221 W. Hays St., Boise, ID 83702
	and the name of the initial registered agent is:	Mary A. Davis
4.	Management of the professional limited liability company will be vested in:	
	☐ Manager(s) ☑ Mem	nber(s)
5.	If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one manager. If management is to be vested in members, list the name(s) and address(es) of at least one initial member.	
	Name	Address
	Mary A. Davis	3296 N. Mountain Lane, Boise ID 83702
6.	Signature(s) of at least one person responsible	for forming the limited liability company:
	Signature Mary A. Marie	
	Typed Name/ Mary A. Davis	
	Capacity Member	zariou   20
	Signature	Secure   S
	Typed Name	IDAHO SECRETARY OF STATE  12/14/2005 05:00
ı	Capacity	CK: 2298 CT: 194990 BH: 926718