



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2016 JAN 19 PM 1:08

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:

Greg Custer Counseling, LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

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

601 Addison Ave Twin Falls, ID 83301

(Street Address)

(Mailing Address, if different)

3. The name and complete street address of the registered agent:

Greg Custer

601 Addison Ave Twin Falls, ID 83301

(Name)

(Address)

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

Greg Custer

601 Addison Ave Twin Falls, ID 83301

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

601 Addison Ave Twin Falls, ID 83301

(Address)

Signature of organizer(s).

Printed Name: Greg Custer

Signature: *Greg Custer*

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

01/19/2016 05:00

CK:3062 CT:149788 BH:1509226
1@ 30.00 = 30.00 CONVERSION #2

W 161048



STATEMENT OF CONVERSION

Pursuant to § 30-22-405, Idaho Code

Filing fee: \$30 typed, \$50 not typed

Complete and submit the form in duplicate.

FILED EFFECTIVE

2016 JAN 19 AM 11:21

SECRETARY OF STATE
STATE OF IDAHO

Note: Conversion documents are complex. Please seek appropriate legal and/or financial advice before making this important business decision.

1. CONVERTING ENTITY:

Name: Family Interventions, LLP

Jurisdiction: Idaho

Type: Limited Liability Partnership

(Corporation, Limited Liability Company, Limited Partnership, etc...)

☒ This is a domestic entity, and this plan of conversion was approved in accordance with § 30-22-405, Idaho Code.

☐ This is a foreign entity, and this plan of conversion was approved in accordance with the law of its jurisdiction of formation.

2. CONVERTED ENTITY:

Name: Greg Custer Counseling, LLC

Jurisdiction: Idaho

Type: Limit Liability Company

(Corporation, Limited Liability Company, Limited Partnership, etc...)

a. If this is a **domestic** entity or domestic limited liability partnership, please attach a copy of the entity's public organic record, or statement of qualification.

b. If this is a **foreign** entity please designate a registered agent in the space provided:

(Registered Agent Name)

(Address)

3. EFFECTIVE DATE OF CONVERSION:

☒ Effective upon filing

☐ On future date:

(Enter date – not more than 90 days in the future)

Printed Name: Greg Custer

Capacity: Owner Manager

Signature:

Secretary of State use only

IDAHO SECRETARY OF STATE

01/19/2016 05:00

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