





## STATE OF IDAHO Office of the secretary of state, Phil McGrane CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

## -FILED-

File #: 0005294150

Date Filed: 6/27/2023 12:38:34 PM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same I descriptions below)	Day Service (see	Standard (filing fee \$100)	
1. Limited Liability Company Name			
Type of Limited Liability Company		Professional Limited Liability Company	
Entity name		Flourish Therapy, PLLC	
Profession			
The business is organized to practice the profession of:		Psychology	
2. The complete street address of the principal office is:			
Principal Office Address		408 S. EAGLE RD	
		SUITE 205	
		EAGLE, ID 83616	
3. The mailing address of the principal office is:			
Mailing Address		408 S EAGLE RD STE 205	
		EAGLE, ID 83616-6079	
4. Designated Agent Name and Address		*	
Registered Agent Name and Address     Registered Agent		NORTHWEST REGISTERED AGENT LLC	
Negistered Agent		Commercial Registered Agent	
		Physical Address	
		784 S CLEARWATER LOOP STE B	
		POST FALLS, ID 83854	
		Mailing Address	
		784 S CLEARWATER LOOP STE B POST FALLS, ID 83854	
☑ I affirm that the registered agent appoint	ted has consented	to serve as registered agent for this entity.	
5. Governors			
Name		Address	
Megan Ebel	SUITE 205	408 S. EAGLE RD SUITE 205 EAGLE, ID 83616	
Signature of Organizer:	1		
Megan Ebel		06/27/2023	