



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2013 APR 26 PM 1:44

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

INSIGHT OCCUPATIONAL THERAPY, LLC

2. The complete street and mailing addresses of the initial designated office:

4057 N Lower Rd, Pocatello, ID, 83204

(Street Address)

(Mailing Address, if different than street address)

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

Corporation Service Company

(Name)

12550 W. Explorer Drive, Suite 100, Boise, ID 83713

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

NameAddress

JILL A SCHUETTE

4057 N LOWER RD, POCATELLO, ID, 83204

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

4057 N LOWER RD, POCATELLO, ID, 83204

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person. Corporation Service Company, Organizer

Signature By:

Typed Name: Barbara Perry

Title: Assistant Secretary

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
04/26/2013 05:00
CK: NONE CT: 1157 BH: 1371387
1 @ 100.00 = 100.00 ORGAN LLC # 2

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