



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2012 AUG 27 AM 9:11

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

ASPEN MEADOWS HOME CARE LLC

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

104 SOUTH WARPATH, SALMON ID 83467

(Street Address)

(Mailing Address, if different than street address)

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

WAYNE J HAMBLIN

(Name)

104 SOUTH WARPATH, SALMON ID 83467

(Street Address)

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

Name

Address

WAYNE J HAMBLIN

125 WILLIAMS CREEK ROAD, SALMON ID 83467

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

104 SOUTH WARPATH, SALMON ID 83467

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: WAYNE J HAMBLIN

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
08/27/2012 05:00
CK: 10946 CT: 192977 BH: 1337351
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W 116732