



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

10 SEP 23 AM 11:16

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Robin Bianco Counseling Services LLC

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

2101 Lakewood Drive, Suite 220 Coeur d'Alene, Idaho 83814

(Street Address)

same as above

(Mailing Address, if different than street address)

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

Robin Bianco

(Name)

2101 Lakewood Dr., Ste. 220 Coeur d'Alene, Id. 83814

(Street Address)

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

NameAddress

Robin Bianco

2101 Lakewood Dr., Ste. 220 Coeur d'Alene, Id. 83814

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

Robin Bianco, M.Ed., LCPC 2101 Lakewood Drive Suite 220 Coeur d'Alene, Idaho 83814

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Robin BiancoTyped Name: Robin Bianco

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
09/23/2010 05:00
CK: 1171 CT: 251483 BH: 1248195
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