



Printed Name:

Signature:
Revised 01/2019

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY C

Title 30, Chapters 21 and 25, Idaho Code

For Office Use Only

-FILED-

File #: 0004510317

Date Filed: 11/17/2021 1:30:00 PM

	Base Filing fee: \$100.00 + \$	20.00 for manual processi	ing (<u>form must be tybed).</u>	∹,
				/2
1.	The name of the professional limited lish	ility compony io:		2
١.	The name of the professional limited liability company is:			—
	Social Solutions Work, PLLC			<u> </u>
2.	The complete street and mailing addresses of the principal office is:			3
	4649 N. Futurity Ave., Boise, ID 83704			PI
	(Street Address)			
				Re
	(Mailing Address, if different)			U.
3.	Name and street address of registered agent <u>in Idaho</u> :			ived
	Jon Speiser	4649 N. Fut	curity Ave., Boise, ID 83704	ф
	(Name)	(Address)		४व
4	The name and address of at least one governor of the limited liability company:			
	Jeannette Curtis	4649 N. Fut	curity Ave., Boise, ID 83704	IJ
	(Name)	(Address)		Ø
				G
	(Marsa)	(Addunes)		7
				tar
	(Name)	(Address)		4
5.	Mailing address for future correspondence (annual report notices):			0
	4649 N. Futurity Ave., Boise, ID 83704			20
	(Mailing Address)			(† ()
6.	The limited liability company is a professional company, and the principal profession or professions for which member duly licensed or otherwise legally authorized to render professional services is:			rs ca re
	Licensed Master of Social Work (LMSW)			Ľ
				- E
7	Signature of a manager, member, or an o	organizer	Secretary of State use only	awerence
Pri	Printed Name: Jeannette Curtis			
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				Deni