



Revised 01/2019

CERTIFICATE OF ORGANIZATION -FILE PROFESSIONAL LIMITED LIABILITY COMPANY Part File #: 0004523496

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| Ž | CERTIFICATE OF ORGANIZATION | - File #: 0004523496 | 3002 |
| E. | PROFESSIONAL LIMITED LIABILI Title 30, Chapters 21 and 25, Idaho Code Base Filing fee: \$100.00 + \$20.00 for manual processing (form r | Date Filed: 11/30/2021 1:16:00 PM (nust be typed). | NC/ W2/ |
| 1. | The name of the professional limited liability company is: Boise Counseling and Therapy PLLC | | 21 1:1 |
| 2. | The complete street and mailing addresses of the principal office is: 13070 W Heatherbrook Drive, Boise, ID 83 | 3713 | ת אם די |
| 3. | Name and street address of registered agent in Idaho: | | Receiv |
| | | | ived by |
| 4 . | The name and address of at least one governor of the limited liability company: Jayne Derr | | ID S |
| | | | ecretary |
| 5 . | Mailing address for future correspondence (annual report notices): 13070 W Heatherbrook Drive, Boise, ID 83713 | | of S |
| 6. | The limited liability company is a professional company, and the principal profession or professions for which members duly licensed or otherwise legally authorized to render professional services is: Social Work | | ct |
| 7. | Signature of a manager, member, or an organizer. | Secretary of State use only | awerenc |
| | Printed Name: Jayne Derr Signature: | | |
| | nted Name: Jayne Derr | | Denney |
| Sig | Signature: | | |