



0003389437

**STATE OF IDAHO***Office of the secretary of state, Lawerence Denney***ARTICLES OF INCORPORATION (NONPROFIT)**

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$30.00 - Make Checks Payable to Secretary of State

*For Office Use Only***-FILED-**

File #: 0003389437

Date Filed: 1/7/2019 2:35:08 PM

Article 1: Corporation Name Entity name		Magic Valley Suicide Awareness and Prevention, Inc												
Article 2: Effective Date The corporation shall be effective when filed with the Secretary of State.														
Article 3: Purpose The purpose for which the corporation is organized is: General Nonprofit														
Article 4: Voting Members: The corporation has voting members.														
Article 5: Asset Distribution on Dissolution Upon dissolution the assets shall be distributed: all assets will be distributed to another nonprofit organization with a similar purpose.														
Article 6: IRS Designation Is this nonprofit a 501(c)3? 501(c)3 purpose for which the corporation is organized: Yes To provide educational opportunities to the residents of the Magic Valley as it relates to preventing suicide within our community.														
Article 7: The mailing address of the corporation shall be: Mailing Address 236 RIVER VISTA PLACE 301 LORI STEWART United States Minor Outlying Islands														
Article 8: Registered Agent Name and Address Registered Agent Evan Roth Registered Agent Physical Address 236 RIVER VISTA PLACE STE 301 TWIN FALLS, ID 83301 Mailing Address 236 RIVER VISTA PLACE STE 301 TWIN FALLS, ID 83301														
Article 9: Incorporator Name(s) and Address(es) <table border="1"> <tr> <td>Name of individual or organization</td> <td>Address</td> </tr> <tr> <td>LORI STEWART</td> <td>3013 EAST 3600 NORTH TWIN FALLS, ID 83301</td> </tr> </table>			Name of individual or organization	Address	LORI STEWART	3013 EAST 3600 NORTH TWIN FALLS, ID 83301								
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Article 10: Director Name(s) and Address(es) <table border="1"> <thead> <tr> <th>Name of individual or organization</th> <th>Title</th> <th>Director Address</th> </tr> </thead> <tbody> <tr> <td>LORI STEWART</td> <td>Director</td> <td>3013 EAST 3600 NORTH TWIN FALLS, ID 83301</td> </tr> <tr> <td>MELISSA OSSEN</td> <td>Director</td> <td>459 LOCUST ST. NORTH 102 TWIN FALLS, ID 83301</td> </tr> <tr> <td>DONNA STALLEY</td> <td>Director</td> <td>3127 HIGHLAWN DRIVE TWIN FALLS, ID 83301</td> </tr> </tbody> </table>			Name of individual or organization	Title	Director Address	LORI STEWART	Director	3013 EAST 3600 NORTH TWIN FALLS, ID 83301	MELISSA OSSEN	Director	459 LOCUST ST. NORTH 102 TWIN FALLS, ID 83301	DONNA STALLEY	Director	3127 HIGHLAWN DRIVE TWIN FALLS, ID 83301
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The Articles of Incorporation must be signed by at least one incorporator.

LORI STEWART
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01/07/2019
Date