

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

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(Instructions on back of application)

1.	The name of the limited liability com One Life Counseling, LLC	npany is:	
2.	The street address of the initial regis	46	*
	and the name of the initial registered Audra J. Bryant	d agent at the above address is:	
3.	The mailing address for future correspondence is: PMB 137, 228 E. Plaza St., Suite B Eagle, ID 83616		
4.	The limited liability company will be:		
	Manager-managed or Member	r-managed (please check the appropriate box)	
5.	. If manager-managed, list the name(s) and address(es) of at least one initial manager. If member-managed, list the name(s) and address(es) of at least one initial member.		
	<u>Name</u>	Address	
	Audra J. Bryant	PMB 137, 228 E. Plaza St., Suite B	
		Eagle ID 83616	
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6. Signature of at least one person responsible for forming the limited liability company:			
	Signature: Audra J. Bryant Typed Name: Audra J. Bryant	Secretary of State use only	
	Capacity: Owner/Manager		
	Signature	Secretary of State use only Wind to the state use only W7078	
	Typed Name:	IDAHO SECRETARY OF STATE	*
	Capacity:	CX: 165 CT: 221937 BH: 1096775 1 0 108.00 = 100.00 ORGAN LLC	5