



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 JUL 29 AM 10:21

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Home Health Services of Idaho LLC

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

910 Main Street #320, Boise, ID 83702

(Street Address)

(Mailing Address, if different than street address)

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

Darnall & Associates PLLC

(Name)

910 Main Street #364, Boise, ID 83702

(Street Address)

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

Name

Address

Diversified Franchise Concepts LLC

1493 N. Colline Bello Way, Eagle, ID 83616

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

910 Main Street #320, Boise, ID 83702

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature *Eric E. Mott*
Typed Name: Eric E. Mott

Signature *Jerry W. Darnall*
Typed Name: Jerry W. Darnall

Secretary of State use only

IDAHO SECRETARY OF STATE
07/29/2010 05:00
CK: 2392 CT: 202615 BH: 1232637
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

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