

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2014 APR 15 PM 2: 25

| 1. | The name of the limited liability con | SECRETARY OF STATE STATE OF IDAHO |
|-------------------------|---|--------------------------------------|
| ٠. | Alliance Concierge Care, LLC | |
| 2. | The complete street and mailing addresses of the initial designated office: 228 E. Woodlander Dr., Eagle, ID 83616 (Street Address) | |
| • | | |
| | (Mailing Address, if different than street address) | |
| 3. | The name and complete street address of the registered agent: | |
| | Josh Sears | 2752 S. Goshen, Boise, Idaho 83709 |
| | (Name) | (Street Address) |
| 4. | The name and address of at least one member or manager of the limited liability company: | |
| | Name | Address |
| | Andrea Axteli | 228 E. WOODLANDER, EVELE 1D 83616 |
| | | 83016 |
| | | |
| | | |
| | | |
| | | |
| 5. | Mailing address for future correspond | |
| | 228 F. WOODLANDE | R DR., EAGLE, 1D 83616 |
| 6. | Future effective date of filing (optional): N/A | |
| _ | nature of a manager, member or son. | |
| • | | Secretary of State use only |
| Signature Andrea Andrea | | |
| Тур | ed Name: Andrea Axtell | |
| Sig | nature | |
| _ | ed Name: | TROWN SECRETARY OF STATE |

cert_org_lic Rev. 07/2010

IDAHO SECRETART OF STATE 04/16/2014 05:00 CK: 1985 CT: 295719 BH: 1428467 1 8 199.00 = 100.00 DRGAN LLC # 2