



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2016 AUG -4 AM 9:22

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Tafoya-Fisher Behavioral Health LLC

(Remember to include the words "limited liability company," "limited company," or the abbreviations LLC, LLP, or LC)

2. The complete street and mailing addresses of the principal office is:

16 12TH Ave. Ste 201

(Street Address)

(Mailing Address, if different)

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

Corrine Tafoya-Fisher

16 12th Ave. So. Ste. 201

(Name)

(Street Address, P.O. Box, or other location of principal office)

4. The name and address of at least one governor of the limited liability company:

Corrine Tafoya Fisher

16 12th Ave So. Ste. 201 Nampa, ID 83651

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

16 12th Ave. So. Ste 201

(Address)

Signature of organizer(s).

Signature: Corrine Tafoya Fisher

Printed Name: Corrine Tafoya Fisher

Signature: _____

Printed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

08/04/2016 05:00

CK:4117 CT:327526 BH:1540448

1@ 100.00 = 100.00 ORGAN LLC #2

W170085