

CERTIFICATE OF ORGANIZATION EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 JUL 13 AM 8: 54

1. T	The name of the limited liability company is:		SECRETARY OF STATE OF IDAHO
JLW Counseling, LC			On the Or to
	The complete street and mailing addresses of the initial designated office: 150 W. USHOF Rd. Suite 120, mendian, 10 63646 (Street Address) (Mailing Address, if different than street address)		
	The name and complete street address of the registered agent:		
; :	Jamie Weiszhaur (Name)	(Street Address)	
	The name and address of at least one member or manager of the limited liability company:		
Ū	Name	Address	
	Jamie Weischaur	(same as above)	
			<u> </u>
•			
5. Mailing address for future correspondence (annual report notices):			
	(same as above)		
6. F	uture effective date of filing (optional):	
Signa	ature of a manager, member or a	uthorized	
persu		Secretary of	f State use only
	ature James Weishaw		
Туре	d Name: Jamie Weiszhaa	<u>v</u>	
		IDAHO	SECRETARY OF STATE
Signa	ature	CK: 1818	3/2012 05:09 CT: 272335 M: 1331888
Type	d Name [.]	1 # 100.00	= 108.80 ORGAN LLC # 2

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