

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

THE	CERTIFICATE LIMITED LIABI Title 30, Chapters 21 and Filing fee: \$100 typed, \$1 Complete and submit the	LITY COMPAN 25, Idaho Code 20 not typed	Eli .
1.	The name of the limited liability company is: FREEDM1 COUNSELING LLC (Remember to include the words "Limited Liability Company," "Limited Company,"		
2.	The complete street and mailing addresses of the principal office is: 119 WASHINGTON STREET, PRIEST RIVER IDAHO 83856		
	BOX 387, PRIEST RIVER IDAHO 83856		
3.	The name of the registered agent and street address of the registered agent:		
	KAREN VOLLMER-POSELEY		ON STREET, PRIEST RIVER IDAHO 83856 office box or postal mail box)
4.	The name and address of at least KAREN VOLLMER-POSELEY	•	nited liability company: RIVER IDAHO 83856
	No. 10	(Ardress)	
	(Name)	(Address)	
	(Name)	(Address)	
5.	Mailing address for future correspondence (annual report notices): BOX 387, PRIEST RIVER IDAHO 83856 (Address)		
Sign Sign Print	ature of organizér(s). ature: AVEL VOI MEV- ted Name: KAREN VOLLMER-POS	Poseley	Secretary of State use only IDAHO SECRETARY OF STATE 07/10/2017 05:00 CK:1317 CT:342239 BH:1592643

Rev. 11/2015

Signature:

Printed Name: _____