

# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Robert B. Evnen, Secretary of State  
P.O. Box 94608  
Lincoln, NE 68509  
[www.sos.nebraska.gov](http://www.sos.nebraska.gov)

INCLUSIVE ABA NE LLC

Name of the limited liability company: \_\_\_\_\_

*The name must contain the words Limited Liability Company or Limited Company or the abbreviation L.L.C., LLC, L.C. or LC. Limited may be abbreviated as Ltd., and Company may be abbreviated as Co.*

Street and mailing address of the initial designated office:

5000 Central Park Drive #204 Lincoln NE 68504  
Street Address (Required) City ZIP

Mailing Address (if different from street address) City NE ZIP

Name of the initial agent for service of process: Corporate Creations Network Inc.

Street, mailing address and post office box (if any) of the initial agent for service of process:

5000 Central Park Drive #204 Lincoln NE 68504  
Street Address (Required) City ZIP

PO Box/Mailing Address (if different from street address) City NE ZIP

Effective date if other than the date filed \_\_\_\_\_



Signature of Organizer

JT Gutman  
Printed Name of Organizer

*Legal notice: The Secretary of State's office cannot provide legal advice. We highly recommend that you seek professional legal, tax and financial advice to assist you in forming your business.*