



**CERTIFICATE OF ORGANIZATION  
LIMITED LIABILITY COMPANY**

12 MAY 21 AM 10:02

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Mindful Massage LLC

2. The complete street and mailing addresses of the initial designated office:

1578 West 200 North Blackfoot, ID 83221

(Street Address)

(Mailing Address, if different than street address)

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

Amanda Henrie

(Name)

1578 West 200 North

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

**Name**

**Address**

Amanda Henrie

1578 West 200 North Blackfoot, ID 83221

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

1578 West 200 North Blackfoot, ID 83221

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature Amanda Henrie  
Typed Name: Amanda Henrie

Signature \_\_\_\_\_  
Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
05/21/2012 05:00  
CK: 1283 CT: 270627 BH: 1325057  
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