CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2015 JAN 28 AM 8: 55

The name of the lim	nited liability compa	ny is:	SECRETARY OF STAT STATE OF IDAHO
BodyMindBusiness, Ll	_C		
The complete street 2318 Garey Lane, File	_	sses of the initial de	signated office:
(Street Address)			
(Mailing Address, if different	than street address)		
The name and comp	olete street address	of the registered a	gent:
Debra Jones	2	318 Garey Lane, Filer, l	ID 83328
(Name)	(5	Street Address)	
The name and address company:	ess of at least one	member or manage	r of the limited liability
	<u>e</u>	_	Address
company:	<u>e</u>		Address
company:	<u>e</u>		Address
company:	<u>e</u>		Address
company:	2	318 Garey Lane, Filer, I	Address ID 83328
Debra Jones	future corresponder	318 Garey Lane, Filer, I	Address ID 83328
Debra Jones Mailing address for the second	future corresponder	318 Garey Lane, Filer, l	Address ID 83328

Signature <u>Lebra Jones</u>

Typed Name: <u>Debra Jones</u>

Signature_____

Typed Name:

person.

Secretary of State use only

IDAHO SECRETARY OF STATE 01/28/2015 05:00

CK:1082 CT:305693 BH:1459077 16 100.00 = 100.00 ORGAN LLC #2 16 20.00 = 20.00 EXPEDITE C #3

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