

CERTIFICATE OF ORGANIZATION

•	on back of application)	SECRETARY OF STATE STATE OF IDAHO	
The name of the limited liab	pility company is:	SIATEOFIDAMAIL	
Body Shop Fitness Centers - From	uitland, LLC	UINU	
The complete street and ma	iling addresses of the initial of	designated office:	
1322 N. Whitley Drive Fruitland	, ID 83619		
(Street Address) P.O. Box 622 Fruitland, ID 836	19		
(Mailing Address, if different than street	address)		
The name and complete stre	eet address of the registered	agent:	
James D Smith	2385 NE 16th Street F	2385 NE 16th Street Fruitland, ID 83619	
(Name)	(Street Address)		
The name and address of at company: Name	t least one member or manaç	ger of the limited liability	
company: <u>Name</u>		<u>Address</u>	
company: Name James D. Smith - Manager	2385 NE 16th St Fruitl	Address and, ID 83619	
company: <u>Name</u>		Address and, ID 83619	
company: Name James D. Smith - Manager	2385 NE 16th St Fruitl	Address and, ID 83619	
company: Name James D. Smith - Manager	2385 NE 16th St Fruitl	Address and, ID 83619	
company: Name James D. Smith - Manager	2385 NE 16th St Fruitl	Address and, ID 83619	
company: Name James D. Smith - Manager	2385 NE 16th St Fruitl	Address and, ID 83619	
Mame James D. Smith - Manager Anita M. Smith - Manager	2385 NE 16th St Fruitl	Address and, ID 83619 and, ID 83619	
Mame James D. Smith - Manager Anita M. Smith - Manager	2385 NE 16th St Fruitle 2385 NE 16th St Fruitle prrespondence (annual repor	Address and, ID 83619 and, ID 83619	

Signature of a manager, member or authorized

person.

Signature

Typed Name:

Signature

Typed Name:

James D

Anita M. Smith - Manager

Secretary of State use only

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02/27/2014 65:00
CK: 1231 CT: 292859 BH: 1412554
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