

Printed Name:

Signature:

Rev. 01/2018

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code
Base Filing fee: \$100.00 typed, \$120 not typed
Complete and submit the application in duplicate.

2018 MAR 28 AM 8: 50 SECRETARY OF STATE

| The mane of the limited liebili | STATE OF ID |
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| The name of the limited liabili | · · · |
| Boise Integrative Medicine | |
| (Remember to include the v | vords "Limited Liability Company," "Limited Company, "or the abbreviations L.L.C., LLC, or LC) |
| The complete street and mail | ing addresses of the principal office is: |
| 2524 N. Stokesberry Place | , Meridian, Idaho. 83646 |
| (Street Address) | |
| | |
| (Mailing Address, if dilierent) | |
| The name and complete stree | et address of the registered agent: |
| Garry L Shohet | 2524 N. Stokesberry Place |
| (Name) | (Address) |
| | 2524 N. Stokesberry Place |
| | (Address) |
| Garry L Shohet (Name) | |
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| (Name) | (Address) |
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