



0003605072

**STATE OF IDAHO***Office of the secretary of state, Lawerence Denney***AMENDMENT TO CERTIFICATE OF ORGANIZATION OF
LIMITED LIABILITY COMPANY**

Idaho Secretary of State
PO Box 83720
Boise, ID 83720-0080
(208) 334-2301

Filing Fee: \$30.00 - Make Checks Payable to Secretary of State

*For Office Use Only***-FILED-**

File #: 0003605072

Date Filed: 8/26/2019 10:45:26 AM

Amendment to Certificate of Organization of Limited Liability Company											
Select one: Standard, Expedited or Same Day Service (see descriptions below)											
Standard (filing fee \$30)											
The current name of the limited liability company is: FOUNDATION FITNESS, LLC											
The file number of this entity on the records of the Idaho Secretary of State is: 0000598127											
Entity Type: Limited Liability Company											
Entity Subtype: Limited Liability Company											
The date the certificate of organization was originally filed: 2018-03-21 12:00:00.000											
Limited Liability Company Name											
Entity name We Care, A Safe Place To Heal, LLC											
2. The complete street address of the principal office is amended to:											
Principal Office Address 827 W PRAIRIE AVE HAYDEN, ID 83835											
3. The mailing address of the principal office is amended to:											
Mailing Address 827 W PRAIRIE AVE HAYDEN, ID 83835-8459											
4. Managers and Members											
<table border="1"> <thead> <tr> <th>Name</th> <th>Title</th> <th>Address</th> </tr> </thead> <tbody> <tr> <td>SHAWN BURKE</td> <td>Manager</td> <td>1022 HARLEQUIN DR POST FALLS, ID 83854</td> </tr> <tr> <td>Christopher Bowman</td> <td>Manager</td> <td>CHRISTOPHER BOWMAN SR. 12311 W TIGERSEYE DR SUN CITY WEST, AZ 85375</td> </tr> </tbody> </table>			Name	Title	Address	SHAWN BURKE	Manager	1022 HARLEQUIN DR POST FALLS, ID 83854	Christopher Bowman	Manager	CHRISTOPHER BOWMAN SR. 12311 W TIGERSEYE DR SUN CITY WEST, AZ 85375
Name	Title	Address									
SHAWN BURKE	Manager	1022 HARLEQUIN DR POST FALLS, ID 83854									
Christopher Bowman	Manager	CHRISTOPHER BOWMAN SR. 12311 W TIGERSEYE DR SUN CITY WEST, AZ 85375									
Signature of Authorized Person:											
<i>Shaen Burke</i>		08/26/2019									
Sign Here		Date									