

Printed Name: -

Rev. 11/2015

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

## FILED EFFECTIVE 2016 MAY 11 AM 9: 01

SECRETARY OF CTATE

The name of the limited liability company is:	STATE OF IDAHO
Him-Perfect Wellness, LLC.	
	mpany," "Limited Company," or the abbreviations L.L.C., LLC, or LC)
The complete street and mailing addresses of the	•
1028 Pine Crest Road Mi	05cow 1D 83843
(Street Address)	·
(Mailing Address, if different)	
The name of the registered agent and the stree	et address of the registered agent:
Emily Salisbury 1028	Pine Crest Road Moscow 1D 838 not be a post office box or postal mail box.)
(Name) (Address cann	not be a post office box or postal mail box.)
The name and address of at least one governor	r of the limited liability company:
Emily Salisbury 1020	Pine Crest Road, Moscow ID83843
(Name) (Address)	
(Name) (Address)	
(Name) (Address)	
Alone V	
(Name) (Address)	
Mailing address for future correspondence (ann	nual report notices):
1028 Pine Crest Road Mo	Scow 1D 83843
(Address)	
nature of organizer(s).	
	Secretary of State use only
inature:	IDAHO SECRETARY OF STATE
nted Name: Emily Salisbury	05/11/2016 05:00 CK:3093 CT:324263 BH:1526023
)	16 100.00 = 100.00 ORGAN LLC #2
gnature:	10 20.00 = 20.00 CORP SUR #3
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