



B0885-1864 03/18/2024 1:25 PM Received by Office of the Idaho Secretary of State



**STATE OF IDAHO**  
*Office of the secretary of state, Phil McGrane*  
**CERTIFICATE OF ORGANIZATION LIMITED  
LIABILITY COMPANY**

Idaho Secretary of State  
PO Box 83720  
Boise, ID 83720-0080  
(208) 334-2301  
Filing Fee: \$100.00

For Office Use Only

**-FILED-**

File #: 0005646803

Date Filed: 3/13/2024 7:25:44 PM

Certificate of Organization Limited Liability Company

Select one: Standard, Expedited or Same Day Service (see descriptions below)      Standard (filing fee \$100)

1. Limited Liability Company Name

Type of Limited Liability Company

Limited Liability Company

Entity name

Ignite Weight Loss Clinic LLC

2. The complete street address of the principal office is:

Principal Office Address

JILL ADEPOJU  
788 EASTLAND DR.  
TWIN FALLS, ID 83301

3. The mailing address of the principal office is:

Mailing Address

JILL ADEPOJU  
4264 N 2656 E  
TWIN FALLS, ID 83301-0215

4. Registered Agent Name and Address

Registered Agent

Registered Agent  
Bob Wells

Physical Address:  
376 DUBOIS AVE  
TWIN FALLS, ID 83301

Mailing Address:  
BOB WELLS  
376 DUBOIS AVE  
TWIN FALLS, ID 83301-4613

☒ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

5. Governors

Name	Address
Jill Adepoju	JILL ADEPOJU 4264 N. 2656 E. TWIN FALLS, ID 83301
Nurudeen Adepoju	4264 N. 2656 E. TWIN FALLS, ID 83301

Signature of Organizer:

Sign Here

Date

3/14/24

Print & Mail Enclosures

☒ I understand the document can ONLY be filed if the following items are included:





Payment in the amount of \$100.00 (if expedited, \$140; if 24 hours processing, \$200) - checks payable to the Secretary of State, signed and recently dated.

This filing form (submit within 30 days) **with the required signature(s)**.

If you are submitting a correction, return the correction letter with your updated document.