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# 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 AUG 22 PM 2:12

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

SMITH HEALTH AND WELLNESS LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

22268 N POPE RD, ATHOL, ID 83801

(Street Address)

(Mailing Address, if different)

3. The name of the registered agent and the street address of the registered agent:

RYAN L SMITH

22268 N POPE RD, ATHOL, ID 83801

(Name)

(Address cannot be a post office box or postal mail box.)

4. The name and address of at least one governor of the limited liability company:

RYAN L SMITH

22268 N POPE RD, ATHOL, ID 83801

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):

22268 N POPE RD, ATHOL, ID 83801

(Address)

Signature of organizer(s).

Signature: \_\_\_\_\_

Printed Name: RYAN L SMITH

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

08/22/2016 05:00

CK:4142872 CT:172099 BH:1542980

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