





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 #: 0005157741

Date

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Select one: Standard, Expedit descriptions below)	ed or Same Day Service (see	Standard (filing fee \$100)	
. Limited Liability Company Name			
Type of Limited Liability Compa	any	Limited Liability Company	
Entity name		Northern Grace Salon & Spa LLC	
2. The complete street address of the pr	ncipal office is:		
Principal Office Address		2062 N MAIN STREET COEUR D'ALENE, ID 83814	
3. The mailing address of the principal o	fice is:		
Mailing Address		6128 E POLELINE AVE POST FALLS, ID 83854-8332	
4. Registered Agent Name and Address			
Registered Agent		Registered Agent	
		Gillian Hanks Physical Address:	
		2062 N MAIN STREET	
		COEUR D'ALENE, ID 83814	
		Mailing Address:	
		6128 E POLELINE AVE	
		POST FALLS, ID 83854-8332	
I affirm that the registered	agent appointed has consented	to serve as registered agent for this entity.	
5. Governors	<u> </u>		
Name		Address	
Gillian Hanks	6128 E POLELINE AV		
	POST FALLS, ID 8385	54-8332	
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Signature of Organizer:			
Gillian Hanks		03/16/2023	

Sign Here