



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

2016 FEB 23 AM 9:05
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Fitnessesities Instructor Training 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:

502 S Riverside Harbor Dr, Post Falls ID 83854

(Street Address)

(Mailing Address, if different)

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

Carole J. Fraley

502 S Riverside Harbor Dr, Post Falls ID 83854

(Name)

(Address)

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

Carole J. Fraley

502 S Riverside Harbor Dr, Post Falls ID 83854

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

502 S Riverside Harbor Dr, Post Falls ID 83854

(Address)

Signature of organizer(s).

Printed Name: Carole J. Fraley

Signature: *Carole J. Fraley*

Printed Name: Carole J. Fraley

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

02/23/2016 05:00

CK: 4556 CT: 320729 BH: 1514960

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