





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

-FILED-

File #: 0005180275

Date Filed: 4/4/2023 10:25:51 AM

| Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day S descriptions below) | Service (see Expedited (+\$40; filing fee \$140) |
|-------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| 1. Limited Liability Company Name | |
| Type of Limited Liability Company | Limited Liability Company |
| Entity name | Peppermint Therapy LLC |
| 2. The complete street address of the principal office is: | |
| Principal Office Address | NICOLETTE MACLEOD 8152 N WAYNE DRIVE HAYDEN, ID 83835 |
| 3. The mailing address of the principal office is: | |
| Mailing Address | NICOLETTE MACLEOD |
| | 832 E SOUTHWOOD CT HAYDEN, ID 83835-8547 |
| 4. Devistant d America North and Address | 11/11 DEN, 1D 00000 00-17 |
| Registered Agent Name and Address Registered Agent | Registered Agent |
| registered rigent | Cora J Whitney |
| | Physical Address: |
| | SMITH + MALEK |
| | 601 E FRONT AVE STE 304 |
| | COEUR D ALENE, ID 83814 |
| | Mailing Address: |
| | SMITH + MALEK |
| | 601 E FRONT AVE |
| | STE 304 |
| | COEUR D ALENE, ID 83814-5186 |
| ☑ I affirm that the registered agent appointed h | nas consented to serve as registered agent for this entity. |
| 5. Governors | |
| Name | Address |
| Nicolette Macleod | 832 E. SOUTHWOOD CT. |
| | HAYDEN, ID 83835 |
| Signature of Organizer: | |
| Nicolette Macleod | 04/04/2023 |
| Sign Here | Date |