



# 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 FEB 23 AM 9:53

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:  
**Lotus Touch Therapeutic Massage 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:  
**3040 N. Five Mile Rd. Boise, ID 83713**

(Street Address)

(Mailing Address, if different)

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

**Heather Case**

**3040 N. Five Mile Rd. Boise, ID 83713**

(Name)

(Address)

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

**Heather Case**

**3040 N. Five Mile Rd. Boise, ID 83713**

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

**3040 N. Five Mile Rd. Boise, ID 83713**

(Address)

Signature of organizer(s).

Printed Name: **Heather Case**

Signature: *Heather Case*

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE

**02/23/2016 05:00**

CK:91 CT:320746 BH:1515013

1@ 100.00 = 100.00 ORGAN LLC #2

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