



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

(Instructions on back of application)

2014 NOV 13 PM 1:20

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Blake Wilson Fitness LLC

2. The complete street and mailing addresses of the initial designated office:

1272 E Fall Ct Boise, ID 83706

(Street Address)

(Mailing Address, if different than street address)

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

Blake Wilson

(Name)

1272 E Fall Ct Boise, ID 83706

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Blake Wilson

1272 E Fall Ct Boise, ID 83706

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

1272 E Fall Ct Boise, ID 83706

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

*Blake Wilson*

Typed Name: Blake Wilson

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

11/13/2014 05:00

CK:2358630 CT:172099 BH:1449217

IG 100.00 = 100.00 ORGAN LLC #2

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