







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 #: 0005913698

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Certificate of Organization Limited Liability Cor Select one: Standard, Expedited or descriptions below)		Standard (filing fee \$100)
1. Limited Liability Company Name		
Type of Limited Liability Company		Limited Liability Company
Entity name		METAMORPHOSIS MASSAGE AND WELLNESS, LLC
2. The complete street address of the principal	office is:	
Principal Office Address		819 HIGHWAY 2 STE 104
		SANDPOINT, ID 83864
3. The mailing address of the principal office is	:	
Mailing Address		819 HIGHWAY 2
		STE 104 SANDDOINT ID 92964 1676
		SANDPOINT, ID 83864-1676
4. Registered Agent Name and Address		
Registered Agent		CORPORATE SERVICE CENTER, INC.
		Commercial Registered Agent
		Physical Address
		800 W MAIN ST STE 1460
		BOISE, ID 83702
		Mailing Address
		800 W MAIN ST
		STE 1460
		BOISE, ID 83702
I affirm that the registered agen	t appointed has consented	I to serve as registered agent for this entity.
Name	Address	
Baylie Nitz	819 HIGHWAY 2 STE 104 SANDPOINT, ID 83864	
Signature of Organizer:		
Baylie Nitz		09/27/2024
Sign Here		Date