



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

**FILED EFFECTIVE**

Title 30, Chapters 21 and 25, Idaho Code

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

2018 JUN -4 AM 9:34

Complete and submit the application in duplicate.

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

AWAKEN MASSAGE & MOVEMENT, 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:

106 E Park St., McCall, ID 83638

(Street Address)

(Mailing Address, if different)

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

Registered Agents Inc.

784 S. Clearwater Loop, Ste R Post Falls, ID 83854

(Name)

(Address cannot be a post office box or postal mail box.)

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

Jennifer Stone

106 E Park St., McCall, ID 83638

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

106 E Park St., McCall, ID 83638

(Address)

Signature of organizer(s).

Signature:

Printed Name: Christine Cimadon

Signature:

Printed Name:

Secretary of State use only

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06/04/2018 05:00

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