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# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2018 JUL 25 AM 8:50

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$100.00 typed, \$120 not typed

SECRETARY OF STATE  
STATE OF IDAHOComplete and submit the application in duplicate.

1. The name of the limited liability company is:

Relaxation Therapy, 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:

136 s 4th ave Pocatello, ID 83201

(Street Address)

352 fairmont ave Pocatello, ID 83201

(Mailing Address, if different)

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

Brooke L. Blanchard

352 fairmont ave Pocatello, ID 83201

(Name)

(Address)

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

Brooke L. Blanchard

352 fairmont ave Pocatello, ID 83201

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

352 fairmont ave Pocatello, ID 83201

(Address)

Signature of organizer(s).

Printed Name: Brooke L. Blanchard

Signature:

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE

07/25/2018 05:00

CK:1027 CT:360349 BH:1655362

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