

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

11 AUG 16 PM 12: 43

1. The name of the limited liability company is:

STATE OF IDAHO

| | Alacrity Fitness LLC |
|--|---|
| 2. The complete street and m 4585 South Cloverdale Road I | nailing addresses of the initial designated/principal office: Boise, ID 83709 |
| (Street Address) | |
| (Mailing Address, if different than stre | eet address) |
| 3. The name and complete s | treet address of the registered agent: |
| Michelle Scherle | 80 North Yale Street Nampa, ID 83651 |
| (Name) | (Street Address) |
| The name and address of company: | at least one member or manager of the limited liability |
| <u>Name</u> | Address |
| Michelle Scherle | 80 North Yale Street Nampa, ID 83709 |
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| | correspondence (annual report notices): |
| 80 North Yale Street Nampa, I | D 83651 |
| 6 Euturo offostivo data of filir | na (antional) |
| Future effective date of filir | ig (optional). |
| Signature of a manager, me person. | ember or authorized |
| | Secretary of State use only |
| Signature | Llug. |
| Typed Name: Michelle Scherle | IDAHO SECRETARY OF STATE 98/16/2011 95:99 |
| Signature | CK: 759011 CT: 172099 BH: 1286745 1 9 100.00 = 100.00 ORGAN LLC # 2 |
| Funed Name: | |
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