



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

**FILED EFFECTIVE**

Title 30, Chapters 21 and 25, Idaho Code

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

Complete and submit the application in duplicate.

2016 MAR -4 AM 9:52

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

ADIUVANDIS, 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:

1810 SCHNEIDMILLER AVE, SUITE 241, POST FALLS, ID 83854

(Street Address)

PO BOX 746, POST FALLS, ID 83877

(Mailing Address, if different)

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

DON GARY

1810 SCHNEIDMILLER AVE, STE 241, POST FALLS ID 83854

(Name)

(Address)

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

DON GARY

PO BOX 746, POST FALLS, ID 83877

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

PO BOX 746, POST FALLS, ID 83877

(Address)

Signature of organizer(s).

Printed Name: DON GARY

Signature: [Signature]

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE

03/04/2016 05:00

CK:3665228 CT:172099 BH:1516742

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

W162782