Printed Name:

Signature:

Rev. 01/2018

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code
Base Filing fee: \$100.00 typed, \$120 not typed
Complete and submit the application in duplicate.

FILED EFFECTIVE

2018 FEB 22 AM 10: 01

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability company is:	
	The Kinective Balance, LL	
	(Remember to include the v	vords "Limited Liability Company," "Limited Company, "or the abbreviations L.L.C., LLC, or LC)
2.	The complete street and maili 2285 E 25th St, Idaho Falls	ing addresses of the principal office is:
	(Street Address)	,, 1.5 - 5 - 16 - 1
	175 E 14th St, Idaho Falls,	ID 83404
	(Mailing Address, if different)	
3.	The name and complete stree	et address of the registered agent:
	Paige Rowberry	175 E 14th St, Idaho Falls, ID 83404
	(Name)	(Address)
4.	The name and address of at least one governor of the limited liability company:	
	Paige Rowberry	175 E 14th St, Idaho Falls, ID 83404
	(Name)	(Address)
	(Name)	(Address)
	, ,	(Addiesa)
	(Name)	(Address)
	(Name)	(Address)
5.	Mailing address for future corr	respondence (annual report notices):
5.	175 E 14th St, Idaho Falls,	· ·
	(Address)	
Sia	nature of organizer(s).	
•	D : D !	Secretary of State use only
Hul	nted Name: Paige Rowberry	INIUA SECRESIAN OR SMIME

1DAHO SECRETARY OF STATE 02/22/2018 05:00

CK:2021 CT:311321 BH:1628242 16 100.00 = 100.00 ORGAN LLC #2

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