



0005439096

**STATE OF IDAHO**

Office of the secretary of state, Phil McGrane

**CERTIFICATE OF ORGANIZATION LIMITED
LIABILITY COMPANY**

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$100.00

For Office Use Only

-FILED-

File #: 0005439096

Date Filed: 10/12/2023 10:42:07 AM

Certificate of Organization Limited Liability Company

Select one: Standard, Expedited or Same Day Service (see descriptions below) Expedited (+\$40; filing fee \$140)

1. Limited Liability Company Name

Type of Limited Liability Company

Limited Liability Company

Entity name

Focused Family Integrative Medicine LLC

2. The complete street address of the principal office is:

Principal Office Address

DR. MICHAEL SMITH, NMD
1547 S MIDWAY AVE
SUITE B
AMMON, ID 83406

3. The mailing address of the principal office is:

Mailing Address

2184 CHANNING WAY PMB 323
IDAHO FALLS, ID 83404-8034

4. Registered Agent Name and Address

Registered Agent

REGISTERED AGENTS INC
Commercial Registered Agent
Physical Address
784 S CLEARWATER LOOP STE R
POST FALLS, ID 83854
Mailing Address
784 S CLEARWATER LOOP STE R
POST FALLS, ID 83854☒ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

5. Governors

Name	Address
Michael B Smith	2184 CHANNING WAY #323 IDAHO FALLS, ID 83404
Celeste H Smith	2184 CHANNING WAY #323 IDAHO FALLS, ID 83404

Signature of Organizer:

Michael B Smith

Sign Here

10/12/2023

Date

B0847-4180 10/12/2023 10:44 AM Received by Office of the Idaho Secretary of State