FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

To:

2017 SEP 11 AN 10: 28

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

SECRETARY OF STATE

Complete and sub	mit the application in <u>duplicate</u>	STATE OF IDAHO	
The name of the limited lia	bility company is:	Lute Massage Therapy LLC	
(Remember to include th	words "Limited Liability Company." '	'Limited Company," or the abbreviations L.L.C., LLC, or LC)	
The complete street and m	nailing addresses of the prin	cipal office is:	
605 Wayne Ave, Po			
(Street Address)			
(Mailing Address, if different)			
The name of the registered	d agent and street address	of the registered agent:	
LegalCorp Solutions, LI	_C 800 W Main	800 W Main Street Suite 1460, Boise, ID 83702	
(Name)	(Address carmot be a p	ost office box or postal mail box)	
(Name)	(Address)		
(Name)	(Address)		
(Name)	(Address)		
-	correspondence (annual rep Pocatello, ID 83201	port notices):	
(Address)			
nature of organizer(s).	\bigcirc \land \cdot		
nature:	>4	Secretary of State use only	
INC. M. W.	()	IDAHO SECRETARY OF STATE 09/11/2017 05:00	
ted Name: Sonia Becerra		CK:14645450 CT:172099 BH:160213: 16 180.80 = 100.88 BRGAN LLC #2	

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Rev. 11/2015

Signature:_

Printed Name: