



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

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

2018 MAY -1 PM 3: 35

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:
Vickerman Wellness, 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:
2935 W. Stewart Ave, Boise, ID 83702

(Street Address)

(Mailing Address, if different)

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

Nicole Vickerman 2935 W. Stewart Ave, Boise, ID 83702

(Name)

(Address)

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

Nicole Vickerman 2935 W. Stewart Ave, Boise, ID 83702

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

2935 W. Stewart Ave, Boise, ID 83702

(Address)

Signature of organizer(s)

Printed Name: **Nicole Vickerman**

Signature:

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

05/01/2018 05:00

CK:17977018 CT:172099 BH:1641420

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