







## 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-

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Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Se descriptions below)	rvice (see Standard (filing fee \$100)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	T-R-S Massage Therapy L.L.C.
2. The complete street address of the principal office is:	
Principal Office Address	630 LAWN DALE DRIVE IDAHO FALLS, ID 83401
3. The mailing address of the principal office is:	
Mailing Address	630 LAWNDALE DR IDAHO FALLS, ID 83401-3444
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 ha	s consented to serve as registered agent for this entity.
5. Governors	
Name	Address
Stacy Marie Johnson	630 LAWN DALE DRIVE IDAHO FALLS, ID 83401
Signature of Organizer:	
Stacy Marie Johnson	11/13/2023
Sign Here	Date