





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 #: 0005623629

Date Filed: 3/2/2024 8:08:05 AM

| Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service descriptions below) | e (see Standard (filing fee \$100) |
|---|--|
| 1. Limited Liability Company Name | |
| Type of Limited Liability Company | Limited Liability Company |
| Entity name | Aloha Massage LLC |
| 2. The complete street address of the principal office is: | |
| Principal Office Address | 9580 W WEIR HOLLIS DR BOISE, ID 83709 |
| 3. The mailing address of the principal office is: | |
| Mailing Address | 9580 W WEIR HOLLIS DR BOISE, ID 83709-5592 |
| 4. Registered Agent Name and Address | |
| Registered Agent | UNITED STATES CORPORATION AGENTS INC Commercial Registered Agent |
| | Physical Address |
| | 800 W MAIN ST STE 1460 BOISE, ID 83702 |
| | Mailing Address |
| | 800 W MAIN ST STE 1460 BOISE, ID 83702 |
| ☑ I affirm that the registered agent appointed has contained. | nsented to serve as registered agent for this entity. |
| 5. Governors | |
| Name | Address |
| | 9580 W WEIR HOLLIS DR BOISE, ID 83709 |
| Signature of Organizer: | |
| kristen lynn delatorre | 03/02/2024 |
| Sign Here | Date |