







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney STATEMENT OF QUALIFICATION OF LIMITED **LIABILITY PARTNERSHIP**

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301

Filing Fee: \$100.00 - Make Checks Payable to Secretary of State

For Office Use Only

-FILED-

File #: 0004072868

Date Filed: 11/23/2020 9:22:25 AM

Limited Liability Partnership Name Type of Limited Liability Partnership	Limited Liability Partnership
Entity name	Rorri & Shelly Bodywork Therapy, LLP
Limited Liability Partnership Designation	
_	ith the Secretary of State, the partnership named herein elects to be a limited
The complete street address of the principal office is:	
Principal Office Address	1182 EASTLAND DR N SUITE B TWIN FALLS, ID 83301
The mailing address of the principal office is:	
Mailing Address	1182 EASTLAND DR N STE B TWIN FALLS, ID 83301-8972
Street address of an office in this State:	
Address	None
Registered Agent Name and Address	
Registered Agent	ALL DAY \$49 IDAHO REGISTERED AGENT LLC Commercial Registered Agent
	Physical Address
	784 S CLEARWATER LOOP STE F POST FALLS, ID 83854
	Mailing Address
	784 S CLEARWATER LOOP STE F POST FALLS, ID 83854
☑ I affirm that the registered agent appointed has	consented to serve as registered agent for this entity.
6. Signature of individual authorized by partners to sign:	
Rorri Henstock	11/23/2020
Sign Here	Date

Job Title: Partner