



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

09 NOV 20 AM 8:49

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Ammon Pilates L.L.C.

2. The complete street and mailing addresses of the initial designated/principal office:

4426 E. Chippewa Ln., Ammon, ID 83406

(Street Address)

(Mailing Address, if different than street address)

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

Jordan Johnson

(Name)

4426 E. Chippewa Ln., Ammon, ID 83406

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Michelle Johnson

4426 E. Chippewa Ln., Ammon, ID 83406

Jordan Johnson

4426 E. Chippewa Ln., Ammon, ID 83406

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

Same

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Michelle Johnson

Typed Name:

Michelle Johnson

Signature

Jordan Johnson

Typed Name:

Jordan Johnson

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
11/20/2009 05:00
CK: 1066 CT: 242447 DN: 1196284
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