



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE
2016 JUL -7 AM 9:03

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Capital City 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:

1606 Farmway Rd Caldwell ID 83607

(Street Address)

(Mailing Address, if different)

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

Zulaen Fernandez

1606 Farmway Rd Caldwell ID 83607

(Name)

(Address cannot be a post office box or postal mail box.)

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

Zulaen Fernandez

1606 Farmway Rd Caldwell ID 83607

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

1606 Farmway Rd Caldwell ID 83607

(Address)

Signature of organizer(s).

Signature: Zulaen Fernandez

Printed Name: Zulaen Fernandez

Signature: _____

Printed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

07/07/2016 05:00

CK: CASH CT: 326512 BH: 1536504

1@ 100.00 = 100.00 ORGAN LLC #2

W11688209