



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code
Base Filing fee: \$100.00 typed, \$120 not typed

Complete and submit the application in **duplicate**.

FILED EFFECTIVE
2018 SEP -4 AM 10:47

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Peak Health Chiropractic, 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:

1122 Eastland Drive North Ste. 2

(Street Address)

Twin Falls, ID 83301

(Mailing Address, if different)

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

Tanner Wray

256 Southwood Ave, Twin Falls, ID 83301

(Name)

(Address)

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

Tanner Wray

256 Southwood Ave, Twin Falls, ID 83301

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

256 Southwood Ave, Twin Falls, ID 83301

(Address)

Signature of organizer(s).

Printed Name: **Tanner Wray**

Signature:

Printed Name: _____

Signature: _____

Secretary of State use only

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09/05/2018 05:00

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