

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2015 JAN 21 PM 2: 01

The name of the limited liability co	mpany is:	SECRETARY OF STATE
IntuitiV FiT LLC	•	STATE OF IDAHO
2. The complete street and mailing at 5476 N. Rothmans Ave. Boise, ID. 8371		initial designated office:
(Street Address) 5476 N. Rothmans Ave. Boise, ID. 8371	3	
(Mailing Address, if different than street address)		:
The name and complete street add	dress of the regi	stered agent:
Thaddeas Acree		nans Ave. Boise, ID. 83713
(Name)	(Street Address)	
The name and address of at least company:	one member or	manager of the limited liability
<u>Name</u>		Address
Thaddeas Acree	5476 N. Rothn	nans Ave. Boise, ID. 83713
· <u></u>		
5. Mailing address for future correspo	ondence (annua	I report notices):
5476 N. Rothmans Ave. Boise, ID. 837	•	
	,	
6. Future effective date of filing (option	onal):	·
	-	
Signature of a manager member of person.	or authorized	
Signature		Secretary of State use only IDAHO SECRETARY OF STATE
Typed Name: Thaddeas Acree		01/21/2015 05:00 CK:2511604 CT:172099 BH:1456
· Jpour Hairio		16 100.00 = 100.00 DRGAN LLO
Signature		W146799
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