

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

11 JUN -8 AM 11:09

	(Instructions on back of application) STATE OF IDAHO	
1.	The name of the limited liability company is:	ĺ
	Head to Tee Massage Therapy 610	
2.	The complete street and mailing addresses of the initial designated/principal office:	
	150 E Ruenside Dr Suite 100	
	(Street Address)	
	(Mailing Address, if different than street address)	
3.	The name and complete street address of the registered agent:	
`	Joseph R Osier 11010 W Hickory (Name) Bow, It 83713	
	The name and address of at least one member or manager of the limited liability company:	
	JOANN OSIER 150F Riverside Dr Sa Joseph R OSIER 150F Riverside Dr Sante	el
	Sister & Osler 1505 Kwersie Dr Soute	0
5.	Mailing address for future correspondence (annual report notices):	
	11010 W Hickory Wr Boice + D 83713"	-
6	Future offective date of filing (entional):	
0.	Future effective date of filing (optional):	
Sign	nature of a manager, member or authorized	
port	Secretary of State use only	•
_	nature Ab ann Caux	
Тур	ed Name: John'n' Usien	
O! =-	IDAHO SECRETARY OF STATE	
_	nature CK: 2783 CT: 128527 BH: 1277469 CK: 2782 CT: 128527 BH: 1277386 ed Name:	
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