



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

LIMITED I Title 30, Chapter	ATE OF ORGANIZATION LIABILITY COMPANY s 21 and 25, Idaho Code 100.00 + \$20.00 for manual processing (form must be	For Office Use Only -FILED- File #: 0005159079 Date Filed: 3/13/2023 3:35:00 PM e typed).
The name of the limited liab 3rd Time Health, LLC		
The complete street and ma	the words "Limited Liability Company," "Limited Company, "or the stiling addresses of the principal office is:	abbreviations L.L.C., LLC, or LC)
3008 S 800 W Presto (Street Address)	n ID 83263	······································
(Mailing Address, if different)		
· ·	eet address of the registered agent:	
The name and complete str	-	83263
The name and complete str	eet address of the registered agent: 3008 S 800 W Preston ID	83263
The name and complete stro Jamen Gunnell	3008 S 800 W Preston ID	
The name and complete stro Jamen Gunnell	3008 S 800 W Preston ID	any:
The name and complete streets Jamen Gunnell Name The name and address of a	3008 S 800 W Preston ID Address) t least one governor of the limited liability comp	any:
The name and complete structure of the name and address of a Jamen Gunnell	3008 S 800 W Preston ID (Address) t least one governor of the limited liability comp 3008 S 800 W Preston ID	any:
The name and complete strugamen Gunnell The name and address of a Jamen Gunnell (Name)	3008 S 800 W Preston ID (Address) t least one governor of the limited liability comp 3008 S 800 W Preston ID (Address)	any:
The name and complete strong Jamen Gunnell (Name) The name and address of a Jamen Gunnell (Name)	3008 S 800 W Preston ID (Address) t least one governor of the limited liability comp 3008 S 800 W Preston ID (Address)	any:

Signature:

Printed Name: Jamen Gunnell

Signature of organizer(s).

Printed Name:

Signature:

Revised 12/06/18

Secretary of State use only