



# 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 FEB 28 PM 2:08**

**SECRETARY OF STATE  
STATE OF IDAHO**

1. The name of the limited liability company is:

**Active Therapeutic Massage, LLC.**

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations LLC, LLP, or LC)

2. The complete street and mailing addresses of the principal office is:

**303 S Federal Way Boise Idaho 83705**

(Street Address)

(Mailing Address, if different)

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

**Jennifer Stroud**

**809 S Harding St Boise, Idaho 83705**

(Name)

(Address)

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

**Jennifer Stroud**

**809 S Harding St Boise, Idaho 83705**

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

**809 S. Harding St Boise, Idaho 83705**

(Address)

Signature of organizer(s).

Printed Name: JENNIFER STROUD

Signature: [Handwritten Signature]

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

**02/28/2018 05:00**

CK: CASH CT: 259157 BH: 1629544  
10 100.00 = 100.00 ORGAN LLC #2

**W197732**