

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

	(Instructions on back of ap	plica	ation)	•	2013 J	UN 18 F	M 4: 04	
1.	. The name of the limited liability company	is:			SECR ST	ETARY O ATE OF I	F STATE	
	the Wellness L	. L	_, C.	•				_
2.	. The complete street and mailing address	es o	f the init	ial desig	nated	office:	_	
	873 RAYMOND I	>R	•	I DAL	0 E	ALLS	ID.	834
	(Street Address)							
	(Mailing Address, if different than stroet address)			••				-
3.	. The name and complete street address o		_	-				
	BLANCA HENDOZA 87	>	DAVA	INNIA	np	#DAH	10 FALC	<u>'</u> S ‡ Ò
	(Name) (Stre	et Add	ress)	2014		•	83	702
4.	. The name and address of at least one me company:	edm∈	er or ma	anager o	f the li	mi ted lia	bility	
	Name Or Association and the contract of the co	70	m. .	Add	lross	_		
	BLANCAE MENDOZA 8º	<u> </u>	PAYM	10 ND	<u>ال ،</u>	<u>٠. </u>		-
•	JESSE ZAMORA 8	<u>73</u>	PAYM	CINO?	DR.			-
		ŦD,	410	FALL	S Z	S 83	wa.	
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			····	11.1		,		-
5.	Mailing address for future correspondence	•	•	•		କ୍ଷ ୧୯	402	
					· ·			-
6.	Future effective date of filing (optional): _							
_	gnature of a manager, member or authorson.	orize	ed					
٥.	· · · · · · · · · · · · · · · · · · ·			\$	ecretary	of State use	only	<u></u>
Sigr	ped Name: <u>Blanca E Mendoza</u>	-						
ı yp	ped Name: <u>O/ON(C.E.Mendozo</u>		-					

IDAHO SECRETARY OF STATE

06/19/2013 05:00

CK: 1444476 CT: 172099 BH: 1378637
1 0 100.00 = 100.00 ORGAN LLC # 2

Signature_

Typed Name: TESSE