



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED
2013 AUG -7 AM 8:59

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Root Health, LLC

2. The complete street and mailing addresses of the initial designated office:

122 W 4th St, Ste #5, Moscow, ID 83843

(Street Address)

817 S Adams St, Moscow, ID 83843

(Mailing Address, if different than street address)

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

Kameron Schott

817 S Adams St, Moscow, ID 83843

(Name)

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Kameron Schott

817 S Adams St, Moscow, ID 83843

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

817 S Adams St, Moscow, ID 83843

6. Future effective date of filing (optional): 9-1-13

Signature of a manager, member or authorized person.

Signature

Typed Name: Kameron Schott

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
08/07/2013 05:00
CK: 130 CT: 206169 BH: 1305210
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