251

## FILED EFFECTIVE



## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

SECHETARY CONCERNATE

2015 SEP 17 PM 2: 31

	(Instructions on back of applicati		STATE OF IDAHO
1.	The name of the limited liability	company is:	
		Ideal Fitness LLC	
2.	The complete street and mailing 709 N Street, Lewiston ID 83501 (Street Address)	•	itial designated/principal office:
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
1	Registered Agents Inc.	1900 Northwest Blvd., Ste. 106A Cocur d'Alene ID 83814  (Street Address)	
	(Name)	(Street Address)	
	The name and address of at least one member or manager of the limited liability company:		
	Name	Address	
	Isaac Mendez	709 N Street, Lewiston ID 83501	
5.	Mailing address for future corres	• •	eport notices):
	709 N Street, Lewiston ID 83501		
6.	Future effective date of filing (op	tional):	
Sigr pers	nature of a manager, member	or authorized	
Sign	nature CiPe	Miles and the second se	Secretary of State use only
Туре	ed Name: Amanda J. Beren	(	
Sign	Signature		IDAHO SECRETARY OF STATE 09/17/2015 05:00

cest orgalis Rev. 07/2010