



0004321609

**STATE OF IDAHO***Office of the secretary of state, Lawrence Denney***CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY**

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$100.00

*For Office Use Only***-FILED-**

File #: 0004321609

Date Filed: 6/21/2021 5:14:09 PM

| Certificate of Organization Limited Liability Company                                                                                                                    |                                                                                                                                                                        |      |         |                 |                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|---------|-----------------|---------------------------------|
| Select one: Standard, Expedited or Same Day Service (see descriptions below)                                                                                             | Standard (filing fee \$100)                                                                                                                                            |      |         |                 |                                 |
| 1. Limited Liability Company Name                                                                                                                                        |                                                                                                                                                                        |      |         |                 |                                 |
| Type of Limited Liability Company                                                                                                                                        | Limited Liability Company                                                                                                                                              |      |         |                 |                                 |
| Entity name                                                                                                                                                              | SPIRIT OF HEALING LLC                                                                                                                                                  |      |         |                 |                                 |
| 2. The complete street address of the principal office is:                                                                                                               |                                                                                                                                                                        |      |         |                 |                                 |
| Principal Office Address                                                                                                                                                 | 335 DEINHARD LANE<br>STE 4<br>MCCALL, ID 83638                                                                                                                         |      |         |                 |                                 |
| 3. The mailing address of the principal office is:                                                                                                                       |                                                                                                                                                                        |      |         |                 |                                 |
| Mailing Address                                                                                                                                                          | PO BOX 4464<br>MCCALL, ID 83638-4464                                                                                                                                   |      |         |                 |                                 |
| 4. Registered Agent Name and Address                                                                                                                                     |                                                                                                                                                                        |      |         |                 |                                 |
| Registered Agent                                                                                                                                                         | Registered Agent<br>KAREN A KESSLER<br>Physical Address:<br>335 DEINHARD LANE<br>STE 4<br>MCCALL, ID 83638<br>Mailing Address:<br>PO BOX 4464<br>MCCALL, ID 83638-4464 |      |         |                 |                                 |
| <input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.                             |                                                                                                                                                                        |      |         |                 |                                 |
| 5. Governors                                                                                                                                                             |                                                                                                                                                                        |      |         |                 |                                 |
| <table border="1"><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>KAREN A KESSLER</td><td>PO BOX 4464<br/>MCCALL, ID 83638</td></tr></tbody></table> |                                                                                                                                                                        | Name | Address | KAREN A KESSLER | PO BOX 4464<br>MCCALL, ID 83638 |
| Name                                                                                                                                                                     | Address                                                                                                                                                                |      |         |                 |                                 |
| KAREN A KESSLER                                                                                                                                                          | PO BOX 4464<br>MCCALL, ID 83638                                                                                                                                        |      |         |                 |                                 |
| Signature of Organizer:                                                                                                                                                  |                                                                                                                                                                        |      |         |                 |                                 |
| <u>KAREN A KESSLER</u>                                                                                                                                                   | <u>06/21/2021</u>                                                                                                                                                      |      |         |                 |                                 |
| Sign Here                                                                                                                                                                | Date                                                                                                                                                                   |      |         |                 |                                 |

B0619-8553 06/21/2021 5:16 PM Received by ID Secretary of State Lawrence Denney