

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

(Instructions on back of application)

2012 AUG 30	TAN 19:	ti (	•
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SECRETARY OF

1. The name of the limited liability	y company is: STATE OF IDAMO			
NA	TURAL MOVEMENT FITNESS LLC			
2. The complete street and mailing	g addresses of the initial designated office:			
620 4TH AVE #2 KETCHUM, ID 83	620 4TH AVE #2 KETCHUM, ID 83340			
(Street Address) PO BOX 39 KETCHUM, ID 83340				
(Mailing Address, if different than street addr	ress)			
3. The name and complete street	address of the registered agent:			
TIMOTHY KHOLOS HANNA	620 4TH AVE #2 KETCHUM, ID 83340			
(Name)	(Street Address)			
The name and address of at leacompany:	ast one member or manager of the limited liability			
Name	Address			
TIMOTHY KHOLOS HANNA	620 4TH AVE #2 KETCHUM, ID 83340			
•	espondence (annual report notices):			
PO BOX 39 KETCHUM, ID 83340				
6. Future effective date of filing (o	ptional):			
,				
Signature of a manager, membe	er or authorized			
person.				
-/ ///	Secretary of State use only			
Signature / Cural 9	<u> </u>			
Typed Name: TIMOTHY KHOLOS HAI	NNA			
Signature	IDAHO SECRETARY OF STATE			
Typed Name:	08/30/2012 05:00			
	CK: 1293 CT: 273818 5H: 1338893			