



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

**FILED EFFECTIVE**

2017 MAR -3 AM 9:32

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

HEALING KNEADS MASSAGE, LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

1525 N GARFIELD AVE, POCATELLO, ID 83204

(Street Address)

(Mailing Address, if different)

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

CHELSEY WILLIAMS

1525 N GARFIELD AVE, POCATELLO, ID 83204

(Name)

(Address cannot be a post office box or postal mail box.)

4. The name and address of at least one governor of the limited liability company:

CHELSEY WILLIAMS

1525 N GARFIELD AVE, POCATELLO, ID 83204

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

1525 N GARFIELD AVE, POCATELLO, ID 83204

(Address)

Signature of organizer(s).

Signature: CHELSEY WILLIAMS

Printed Name: CHELSEY WILLIAMS

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

03/03/2017 05:00

CK:116 CT:335482 BH:1571726

1@ 100.00 = 100.00 ORGAN LLC #2

W179376