

251



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 APR -7 PM 1:41

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Gift of Touch Wellness 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:

1667 Lorien Lane, Moscow, ID 83843

(Street Address)

(Mailing Address, if different)

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

Traci Waters

1667 Lorien Lane, Moscow, ID 83843

(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:

Traci Waters

1667 Lorien Lane, Moscow, ID 83843

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

3. (Name)

(Address)

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

1667 Lorien Lane, Moscow, ID 83843

(Address)

Signature of organizer(s).

Signature: EOPrinted Name: Edward Stahlin

Signature: _____

Printed Name: _____

y. 11/2015

Secretary of State use only

IDAHO SECRETARY OF STATE

04/10/2017 05:00

CK:13177910 CT:172099 BH:1578075

10 30.00 = 30.00 ORGAN LLC #2

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IDAHO SECRETARY OF STATE

04/10/2017 05:00

CK:13177358 CT:172099 BH:1578079

10 70.00 = 70.00 ORGAN LLC #2