





Office of the secretary of state, Phil McGrane
CERTIFICATE OF ORGANIZATION LIMITED
LIABILITY COMPANY

PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

-FILED-

File #: 0005536689

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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	NORTH FORTY ESTHETICS LLC
2. The complete street address of the principal office is:	
Principal Office Address	136 W 400 N
	MALAD CITY, ID 83252
3. The mailing address of the principal office is:	
Mailing Address	136 W 400 N
	MALAD CITY, ID 83252-1113
Registered Agent Name and Address	
Registered Agent	DIANNA BURDEN
	Registered Agent
	Physical Address
	265 N 100 E ST
	DOWNEY, ID 83234
	Mailing Address
	PO BOX 183
	DOWNEY, ID 83234-0183

Name	Address
SIERRA D BLACK	136 W 400 N MALAD CITY, ID 83252
CONNOR D BLACK	136 W 400 N MALAD CITY, ID 83252

Signature of Organizer:

5. Governors

SIERRA BLACK 01/03/2024

Sign Here Date