







## STATE OF IDAHO

## Office of the secretary of state, Lawerence 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 #: 0004503770

Date Filed: 11/22/2021 11:43:16 AM

Select one: Standard, Expedited or Same Day Se descriptions below)	ervice (see Standard (filing fee \$100)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	Southerns Wild Healing LLC
2. The complete street address of the principal office is:	
Principal Office Address	DANIELLE SOUTHERN
	835 NIXON ROAD
	POCATELLO, ID 83201
3. The mailing address of the principal office is:	
Mailing Address	DANIELLE SOUTHERN
	835 NIXON RD POCATELLO, ID 83201-5517
1. Registered Agent Name and Address	
Registered Agent	Registered Agent Justin J Southern
	Physical Address:
	835 NIXON ROAD
	POCATELLO, ID 83201
	Mailing Address:
	835 NIXON RD
	POCATELLO, ID 83201-5517
The second state of the se	as consented to serve as registered agent for this entity.
I affirm that the registered agent appointed ha	
I affirm that the registered agent appointed hat 5. Governors	
	Address
5. Governors	
5. Governors  Name	Address  DANIELLE SOUTHERN 835 NIXON ROAD
5. Governors  Name	DANIELLE SOUTHERN
5. Governors  Name	DANIELLE SOUTHERN 835 NIXON ROAD
5. Governors  Name  Danielle Southern	DANIELLE SOUTHERN 835 NIXON ROAD