



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014 JAN 15 AM 8:59

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Medicine Man Bonners Ferry Pharmacy, LLC

2. The complete street and mailing addresses of the initial designated office:

6452 Main Street, Bonners Ferry, Idaho, 83805

(Street Address)

(Mailing Address, if different than street address)

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

Shane Stuermer

(Name)

7420 Blaine Street, Bonners Ferry, ID, 83805

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Aimee Stuermer

Address

7420 Blaine Street, Bonners Ferry, ID, 83805

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

6452 Main Street, Bonners Ferry, ID 83805

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Aimee Stuermer

Secretary of State use only

W183196

Signature

Typed Name:

IDAHo SECRETARY OF STATE
01/15/2014 05:00
CK: 1120 CT: 291768 BH: 1406842
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