







STATE OF IDAHO Office of the secretary of state, Phil McGrane **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 #: 0006293454

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descriptions below)	Company or Same Day Service (see	Standard (filing fee \$100)
1. Limited Liability Company Name		
Type of Limited Liability Company		Limited Liability Company
Entity name		Integrative Health & Wellness, LLC
2. The complete street address of the princi	pal office is:	
Principal Office Address		3510 12TH STREET
		LEWISTON, ID 83501
3. The mailing address of the principal office	e is:	
Mailing Address		3510 12TH ST
		LEWISTON, ID 83501-5575
4. Registered Agent Name and Address		
Registered Agent		KURT BAILEY
		Registered Agent
		Physical Address
		3510 12TH ST STE 200
		LEWISTON, ID 83501
		8.4 DF A.1.1
		Mailing Address
I affirm that the registered ag	ent appointed has consented	d to serve as registered agent for this entity.
	ent appointed has consented	
5. Governors	gent appointed has consented 3510 12TH STR LEWISTON, ID	Address
5. Governors Name	3510 12TH STF	Address REET 83501
5. Governors Name Kurt Bailey	3510 12TH STF LEWISTON, ID 3510 12TH STF	Address REET 83501
5. Governors Name Kurt Bailey Karen Bailey	3510 12TH STF LEWISTON, ID 3510 12TH STF	Address REET 83501