

CERTIFICATE OF ORGANIZATION JUL 22 PM 3: 09 LIMITED LIABILITY COMPANY SECRETARY OF STATE OF IDAHO

	,	, , , , , , , , , , , , , , , , , , , ,	
1.	The name of the limited liabi	ility company is:	
		Tigermoon Healing Arts 1LLC	
2.	•	ling addresses of the initial designated/principal office Northwood Way, Ketchum, ID 83340	:
	(Street Address)	P.O. Box 3222	·
	(Mailing Address, if different than street a		
3.	•	et address of the registered agent:	
	Gwen C. Miller	221 Northwood Way, Ketchum, ID 83340	• •
	(Name)	(Street Address)	
4.	The name and address of at company: Name	least one member or manager of the limited liability Address	
	Gwen C. Millar	221 Northwood Way, Ketchum, ID 83340	
			
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	•		
5.	Mailing address for future cor	respondence (annual report notices):	
	71	82E Kahuna Rd., Kapaa, Hi 96746	
6.	Future effective date of filing	(optional);	
Sigi	nature of organizer(s). (An organ	nizer is a member, or is	
actin	ig in behalf of a member or member	rs).	
	Out	Secretary of State use only	
_	nature <u>y d</u>		
Тур	ed Name: Amy Ha	arne	
		The secretary of CX: 467840 CT: 172899	
	nature	IDAHO SECRETARY OF	STATE
Гур	ed Name:		05 : 00 BH: 122884
			gan llc #
		1 2 20.90 = 20.00 EX	PEDITE C#

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