



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
2012 OCT -9 AM 10:19

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Essential Health LLC

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

1183 N. Meadowstream Star, ID 83669

(Street Address)

PO Box 414 Star, ID 83669

(Mailing Address, if different than street address)

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

Lance Snyder

(Name)

1183 N. Meadowstream Star, ID 83669

(Street Address)

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

Name

Address

Melissa Snyder

1183 N. Meadowstream Star, ID 83669

Lance Snyder

1183 N. Meadowstream Star, ID 83669

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

PO Box 414 Star, ID 83669

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature *Lance Snyder*

Typed Name: Lance Snyder

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
10/09/2012 05:00
CK: 1486 CT: 240396 BH: 1342848
1 @ 100.00 = 100.00 ORGAN LLC # 2

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