



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2015 APR -8 PM 12:00

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

It's Alive Labs, LLC

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

6499 W. Dufferin Ct., Boise, ID 83714

(Street Address)

(Mailing Address, if different than street address)

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

Leonard B. Levitt

(Name)

6499 W. Dufferin Ct., Boise, ID 83714

(Street Address)

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

Name

Address

Leonard B. Levitt

6499 W. Dufferin Ct., Boise, ID 83714

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

6499 W. Dufferin Ct., Boise, ID 83714

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

Signature of a manager, member or authorized person.

Signature

Leonard B. Levitt

Typed Name: Leonard B. Levitt

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

04/08/2015 05:00

CK:31556 CT:20168 BH:1469966

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