FILED EFFECTIVE



ARTICLES OF ORGANIZATION

| | LIMITED LIABILITY COMPANY |
|-------------|---|
| | (Instructions on back of application) |
| 1. | The name of the limited liability company is: |
| | Successful Life Consulting LLC |
| 2. | The street address of the initial registered office is: |
| | Tamarack Resort, 149 Pinnacle Ct, Donnelly, ID 83615 |
| | and the name of the initial registered agent at the above address is: Jeri A. Walz |
| 3. | The mailing address for future correspondence is: |
| | P.O. Box 818, Donnelly, ID 83615 |
| , 4. | The limited liability company will be: |
| | Manager-managed or Member-managed (please check the appropriate box) |
| 5. | If manager-managed, list the name(s) and address(es) of at least one initial manager. If member-managed, list the name(s) and address(es) of at least one initial member. Mame Address |
| | Jeri A. Walz P.O. Box 818, Donnelly, ID 83615 |
| | |
| | |
| | |
| | |
| | |
| | |
| 6. | Signature of at least one person responsible for forming the limited liability company: |
| _ | |
| 7 | Secretary of State use only Typed Name: Jeri A Walz |
| Ċ | Capacity: Mariager |
| _ | |
| | Signature IS |
| | Typed Name: Thouse secondary or a |
| · | Under Secretary of 1 18/2008 CK: MONE CT: 184415 PM |