

FILED EFFECTIVE



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 MAY -4 AM 9:12

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

NEW LIFE LLC

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

329 S WOODRUFF AVE IDAHO FALLS ID 83401

(Street Address)

(Mailing Address, if different than street address)

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

MICHAEL BIDDULPH

(Name)

329 S WOODRUFF AVE IDAHO FALLS ID 83401

(Street Address)

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

**Name****Address**

MICHAEL BIDDULPH

329 S WOODRUFF AVE IDAHO FALLS ID 83401

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

329 S WOODRUFF AVE IDAHO FALLS ID 83401

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature Michael C. Biddulph  
Typed Name: MICHAEL BIDDULPHSignature \_\_\_\_\_  
Typed Name: \_\_\_\_\_

Secretary of State use only

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Revised 07/2008IDAHO SECRETARY OF STATE  
05/04/2009 05:00  
CX: 1001 CT: 236761 DN: 1168844  
1 @ 100.00 = 100.00 ORGAN LLC # 3

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