51					
	CERTIFICATE OF C	TY COMP	PANY	2015 FEB -6 AM 8: 46	
	(Instructions on back of application))}	SECRETARY OF STATE STATE OF IDAHO	
1. The na	ame of the limited liability con	n pany is :		STATE OF IDAHO	
5 B Nutrition LLC					
2. The complete street and mailing addresses of the initial designated office: 101 E. Bullion St., Suite 1 E, Hailey, Id. 83333 (Street Address)					
	(Mailing Address, if different than street address)				
3. The name and complete street address of the registered agent:					
Kristin	Charnholm	101 E. Bullion	St., Suite 1	E, Hailey, Id. 83333	
(Name)		(Street Address)			
Kristin	<u>Name</u> Chamholm	101 E. Builion		ddress 5, Hailey, Id 83333	
	g address for future correspon Bullion St., Suite 1 E, Hailey, Id. 8	•	al report no	otices):	
6. Future	effective date of filing (option	al):			
Signature person. Signature	of a manager, member or Karto U. I. J.	authorized		Secretary of State use only IDAHO SECRETARY OF STATE	
Typed Nan	ne: Kristin Charnholm			62/06/2015 05:00 2050 CT:306135 BH:1460721 0.00 = 100.00 ORGAN LLC #	
Signature_				_	
	ne:			WLLTLTT	

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