



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2010 AUG 31 PM 1:10
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Tha Good Life LLC

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

5254 W Fairview Ave Boise, ID 83706

(Street Address)

Same as Above

(Mailing Address, if different than street address)

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

Nadine Palacio Jenkins

(Name)

4828 N Waterfront Way Boise, ID 83703

(Street Address)

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

Name

Address

Mishelle Harrison

4828 N Waterfront Way Boise, ID 83703

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

4828 N Waterfront Way Boise, ID 83703

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

Signature of a manager, member or authorized person.

Signature Nadine V. Palacio Jenkins

Typed Name: NADINE V. PALACIO JENKINS

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
08/31/2010 05:00
CK: 504596 CT: 172099 BH: 1237078
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W 96005