



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2015 JAN 26 AM 9:53

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

MADE 4 U NUTRITION LLC

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

725 DICKSON AVE

(Street Address)

(Mailing Address, if different than street address)

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

TYLER JONES

(Name)

725 DICKSON AVE, IDAHO FALLS, ID 83402

(Street Address)

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

Name

Address

TYLER JONES

725 DICKSON AVE., IDAHO FALLS, ID 83402

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

467 CONSTITUTION WAY, IDAHO FALLS, ID 83402

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: TYLER JONES

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

01/26/2015 05:00

CK:296 CT:305553 BH:1458588

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

W146817