





STATE OF IDAHO Office of the secretary of state, Phil McGrane CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

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Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Sedescriptions below)	ervice (see Standard (filing fee \$100)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	Optimal Health Science LLC
2. The complete street address of the principal office is:	
Principal Office Address	3224 N. MAPLE GROVE RD. BOISE, ID 83704
3. The mailing address of the principal office is:	
Mailing Address	3224 N MAPLE GROVE RD BOISE, ID 83704-4214
4. Registered Agent Name and Address	
Registered Agent	NOAH EDVALSON
	Registered Agent
	Physical Address
	11988 W. HICKORY DR. BOISE, ID 83713
	Mailing Address
■ I affirm that the registered agent appointed had a second appointed to the control of	as consented to serve as registered agent for this entity.
5. Governors	Address
Name	Address
Noah B. Edvalson	1300 ARTESIAN ROAD EAGLE, ID 83616
Signature of Organizer:	
Noah B. Edvalson	02/17/2025
Sign Here	Date