



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

2016 MAR 23 PM 1:43

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:

The Good Life Ventures LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations "LLC," "LLC," or "L.C.")

2. The complete street and mailing addresses of the principal office is:

802 W. Bannock St., Suite 900, Boise, Idaho, 83702

(Street Address)

(Mailing Address (if different))

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

David Arkoosh

802 W Bannock St., Suite 900 Boise, Idaho 83702

(Name)

(Address cannot be a post office (P.O.) or postal mail box.)

4. The name and address of at least one governor of the limited liability company:

Mike Treinen

802 W. Bannock St., Suite 900, Boise Idaho, 83702

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

802 W Bannock Street, Suite 900 Boise, Idaho 83702

(Address)

Signature of organizer(s)

Signature: _____

Printed Name: **David Arkoosh**

Signature: _____

Printed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

03/23/2016 05:00

CR:3714188 CT:172099 BH:1520102

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