## **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

SECRETARY OF STATE STATE OF IDAHO

2017 DEC 28 PM 1:53

The name of the limited	ishility company is:	
Phillips Natural Living L		
		nited Company," or the abbreviations L.L.C., LLC, or LC)
The complete street and 617 N 1200 W Blackfoo	mailing addresses of the princip	eal office is:
(Street Address)	nt, 1D 63221	
(Mailing Address, if different)		
The name of the registe	ed agent and the street address	of the registered agent:
Steven Blaser Esq.	285 NW Main St, Blackfoot, ID 83221	
(Name)	(Address cannot be a post office box or postal mail box.)	
The name and address of Marisa L. Phillips	of at least one governor of the lin	nited liability company: Stream Ave. Star ID 83669
(Name)	(Address)	
Annalee Phillips	617 N 1200 W Blackfoot, ID 83221	
(Name)	(Address)	
(Name)	(Address)	We have the second of the seco
(Name)	(Address)	
<del>-</del>	e correspondence (annual repor	t notices):
617 N 1200 W Blackfoo	t, ID 83221	
ature of organizer(s).		
ature: Musal	AND I	Secretary of State use only
ed Name: Marisa L. Phill	<u> </u>	IDAMO SECRETARY OF STATE
ature: OMMADO	Ph. Min	12/28/2017 05:00 CX:125 CT:350302 BH:161842

Rev. 11/2015

Printed Name: -

Annalee Phillips

 $10\ 100.00 = 100.00\ \text{DRGAN LLC } \#2$ 1@ 20.00 = 20.00 EXPEDITE C #3

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