## State of Idaho

#### Office of the Secretary of State

#### **CERTIFICATE OF AUTHORITY**

OF

#### WELL LIFE PHARMACY, INCORPORATED

File Number C 205241

I, LAWERENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, dufy executed pursuant to the provisions of the Idaho Business Corporation Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: March 11, 2015

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SECRETARY OF STATE

By Short Dainer

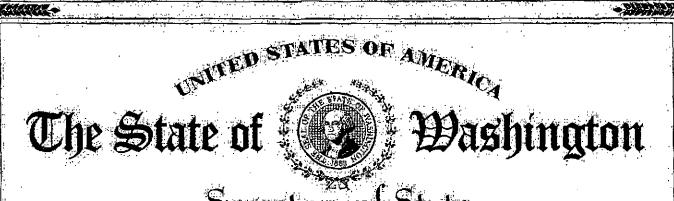
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### APPLICATION FOR CERTIFICATE 2015 MAR 11 AM 11: 26 OF AUTHORITY (For Profit)

	Back of Application)	SECRETARY OF STATE STATE OF IDAHO
e undersigned Corporation applies for a C	Certificate of Authority and	states as follows:
The name of the corporation is:  Well Life Pharmacy, Incorporate	ed	
The name which it shall use in Idaho is:		
It is incorporated under the laws of:	ashington	
Its date of incorporation is: 03/27/20	007	
The address of its principal office is: 23801 E Appleway Ste 260, Lib		
The address to which correspondence 6603 Main Street, Bonners Fern	should be addressed, if d y, ID 83805	ifferent from Item 5, is:
The street address of its registered office	ce in Idaho Is:, 6603 Ma	ain Street, Bonners Ferry, ID 83805
and its registered agent in Idaho at that	t address is: Jeffrey Fo	ster
The names and respective business ad	idrosses of its directors an	d officers are:
THE Harries wild teshective positioes ac	101 00000 01 100 011 1210 12 111	
Name	Title	Business Address
		Business Address 6603 Main Street, Bonners Ferry, ID 8380!
Name	Title	Business Address
Name Jeffrey Foster	Title President	Business Address 6603 Main Street, Bonners Ferry, ID 8380!
Name Jeffrey Foster	Title President	Business Address 6603 Main Street, Bonners Ferry, ID 8380!
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Name Jeffrey Foster Heather Foster	Title President	Business Address 6603 Main Street, Bonners Ferry, ID 8380!
Name Jeffrey Foster Heather Foster	Title President	Business Address 6603 Main Street, Bonners Ferry, ID 8380! 6603 Main Street, Bonners Ferry, ID 8380!  Customer Acct #: (fusing pre-peld account)
Name  Jeffrey Foster  Heather Foster  Oated: 03/11/2015	Title President Secretary/Treasurer	Business Address 6603 Main Street, Bonners Ferry, ID 8380! 6603 Main Street, Bonners Ferry, ID 8380!  Customer Acct #: (*using pre-peld account) Secretary of State use only
Name Jeffrey Foster	Title President Secretary/Treasurer	Business Address 6603 Main Street, Bonners Ferry, ID 8380! 6603 Main Street, Bonners Ferry, ID 8380!  Customer Acct #: (*using pre-peld account) Secretary of State use only
Name  Jeffrey Foster  Heather Foster  Dated: 03/11/2015	Title President Secretary/Treasurer	Business Address 6603 Main Street, Bonners Ferry, ID 8380! 6603 Main Street, Bonners Ferry, ID 8380!  Customer Acct #: (fusing pre-peld account)

C205241



Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

# CERTIFICATE OF EXISTENCE/AUTHORIZATION OF WELL LIFE PHARMACY, INCORPORATED

I FURTHER CERTIFY that the records on lile in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 3/27/2007.

I FURTHER CERTIFY that as of the date of this certificate, WELL LIFE PHARMACY, INCORPORATED remains active and has complied with the filing requirements of this office.

Date: February 24, 2015

UBI: 602-710-103



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Kim Wyman, Scerciacy of State