





STATE OF IDAHO

Office of the secretary of state, Lawerence Denney 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

-FILED-

File #: 0004533114

Date Filed: 12/16/2021 9:00:29 AM

Certificate of Organization Limited Liability Select one: Standard, Expedited descriptions below)		Standard (filing fee \$100)	
1. Limited Liability Company Name			
Type of Limited Liability Company		Limited Liability Company	
Entity name		Naturally Wild Nutrition, LLC.	
2. The complete street address of the prin	cipal office is:		
Principal Office Address		1160 JONES STREET IDAHO FALLS, ID 83401	
3. The mailing address of the principal off	ce is:		
Mailing Address		6406 S GLASS MOUNTAIN BLVD IDAHO FALLS, ID 83404-1213	
4. Registered Agent Name and Address			
Registered Agent		Registered Agent Valerie C Miller Physical Address: 6406 GLASS MOUNTAIN BLVD IDAHO FALLS, ID 83404 Mailing Address: 6406 S GLASS MOUNTAIN BLVD IDAHO FALLS, ID 83404-1213	
☑ I affirm that the registered a	gent appointed has consented t	o serve as registered agent for this entity.	
5. Governors			
Name		Address	
Madison Miller		310 REDWOOD RD #7786 STAR VALLEY RANCH, WY 83127	
Signature of Organizer:			
Madison Miller		12/16/2021	