	OF ORGANIZATION FILED EFFECTIV BILITY COMPANY
	n back of application)
	SEGRETART UP STATE
1. The name of the limited liab WHOLE LIFE STRATEGIES LL	shirty company is:
2. The complete street and ma 507 S FITNESS PLACE, # 100 (Street Address)	iling addresses of the initial designated office: EAGLE, IDAHO 83616
(Mailing Address, if different than street	
3. The name and complete stre	eet address of the registered agent:
NATHAN COONEY	507 S FITNESS PLACE, #100 EAGLE, ID 83616
(Name)	(Street Address)
NATHAN COONEY	Address 507 S FITNESS PLACE, #100 EAGLE ID 83616
507 S FITNESS PLACE, #100 E	orrespondence (annual report notices): EAGLE ID 83616
507 S FITNESS PLACE, #100 E 6. Future effective date of filing Signature of a manager, mem	EAGLE ID 83616
507 S FITNESS PLACE, #100 E	EAGLE ID 83616