



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

11 JAN 18 AM 8:45

1. The name of the limited liability company is:

ENTIRELY NATURAL, LLC

SECRETARY OF STATE
STATE OF IDAHO

2. The complete street and mailing addresses of the initial designated/principal office:

206 WHIP SAW ROAD, MOYIE SPRINGS, ID 83845

(Street Address)

PO BOX 562, MOYIE SPRINGS, ID 83845

(Mailing Address, if different than street address)

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

JULIE SMITH

(Name)

206 WHIP SAW ROAD, MOYIE SPRINGS, ID 83845

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

JULIE SMITH

206 WHIP SAW ROAD, MOYIE SPRINGS, ID 83845

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

PO BOX 562, MOYIE SPRINGS, ID 83845

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: JULIE SMITH

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
01/18/2011 05:00
CK: NO CK # CT: 254461 BH: 1255680
1 @ 100.00 = 100.00 ORGAN LLC # 2

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