







## 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 #: 0004180943

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| Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day descriptions below) | y Service (see Standard (filing fee \$100)                    |
|---|---|
| 1. Limited Liability Company Name   |   |
| Type of Limited Liability Company   | Limited Liability Company                                     |
| Entity name   | TheWholeLife LLC  |
| The complete street address of the principal office is:     Principal Office Address                                  | 2105 ALAN STREET UNIT 8<br>IDAHO FALLS, ID 83404              |
| The mailing address of the principal office is:     Mailing Address   | 2105 ALAN ST<br>APT 8<br>IDAHO FALLS, ID 83404-4949           |
| 4. Registered Agent Name and Address  |   |
| Registered Agent  | REGISTERED AGENTS INC   |
|   | Commercial Registered Agent Physical Address                  |
|   | 784 S CLEARWATER LOOP STE R                                   |
|   | POST FALLS, ID 83854  |
|   | Mailing Address   |
|   | 784 S CLEARWATER LOOP STE R<br>POST FALLS, ID 83854           |
| ☑ I affirm that the registered agent appointed  | d has consented to serve as registered agent for this entity. |
| 5. Governors  |   |
| Name  | Address   |
|   | 2105 ALAN STREET UNIT 8<br>IDAHO FALLS, ID 83404              |
| Signature of Organizer:   |   |
| Capri L Wilkins   | 02/23/2021  |
| Sign Here   | Date  |