

FILED EFFECTIVE

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 JAN 30 PM 3:16

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Idaho fat loss mendian, LLC

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

1317 W River Street

(Street Address)

Boise, ID 83702

(Mailing Address, if different than street address)

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

Dr. Zane Sterling 1317 W. River St

(Name)

(Street Address)

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

Name**Address**Dr. Zane Sterling same as #3

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

1317 W. River Street Boise, ID 83702

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name:

Zane R. Sterling

Signature

Typed Name:

Secretary of State use only
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01/30/2015 05:00CK:2537588 CT:172099 BH:1459621
1@ 100.00 = 100.00 ORGAN LLC #3

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