



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

12 MAY 22 AM 8:40

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Preventive Health, LLC

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

9238 W Beachside Lane

(Street Address)

Boise, ID 83714

(Mailing Address, if different than street address)

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

Danielle Bennion

(Name)

9238 W Beachside Lane Boise, ID 83714

(Street Address)

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

NameAddress

Danielle Bennion

9238 W Beachside Lane Boise, ID 83714

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

9238 W Beachside Lane Boise, ID 83714

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Danielle Bennion

Signature

Typed Name: _____

Secretary of State use only

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05/22/2012 05:00
CK: 1001539 CT: 172099 BH: 1325234
I @ 100.00 = 100.00 ORGAN LLC # 2

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