

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 AUG 10 AM 8:59

(it at alkingaria)
1. The name of the limited liability co	ompany is: SECE SY OF STATE STATE OF IDAHO
DSSC DAN SCHILLI	ING STRENGTH & CONDITIONING LLC
2. The complete street and mailing at 109 Clubhouse Circle #201 Idaho Falls, (Street Address) PO Box 3817 Idaho Falls, ID 83403 (Mailing Address, if different than street address)	ddresses of the initial designated/principal office: , ID 83401
3. The name and complete street add	dress of the registered agent:
Dan Schilling (Name)	109 Clubhouse Circle #201 Idaho Falls, ID 83401 (Street Address)
company:	one member or manager of the limited liability
Name Name	Address 100 Clubbourg Circle #201 Idoba Falla ID 93401
Dan Schilling	109 Clubhouse Circle #201 Idaho Falls, ID 83401
Jana Schilling	109 Clubhouse Circle #201 Idaho Falls, ID 83401
5. Mailing address for future correspo	andence (annual report notices):
PO Box 3817 Idaho Falls, ID 83403	madrice (armadriceport medocs).
6. Future effective date of filing (option	nal):
_	
Signature of a manager, member o	r, authorized
person. Signature	Secretary of State use only
Typed Name: Dan Schilling	
Signature And Shill	IDANO SECRETARY OF STATE 08/10/2011 05:00
Typed Name: Jana Schilling	CK: 1026 CT: 255907 BH: 1285917 1 9 100.00 = 100.00 ORGAN LLC # 2
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