

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE

	(Instructions on ba	ck of application)	2014 NOV 14 AM 9: 49
1.	The name of the limited liability of Living Vibrance Natural Health, LLC	ompany is:	SECRETARY OF STATE STATE OF IDAHO
2.	The complete street and mailing a 9 Pump House Rd. Garden Valley, ID (Street Address) (Mailing Address, if different than street address	83622	itial designated office:
3.	The name and complete street address of the registered agent:		
	Annual \$46.00 Blake's Registered Agents, LLC 19593 Madison Rd. N		Rd. Nampa, ID 83687
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name Shana McQueen	Address 9 Pump House Rd. Garden Valley, ID 83622	
5.	Mailing address for future corresp 9 Pump House Rd. Garden Valley, ID	•	eport notices):
6.	Future effective date of filing (opti	onal):	
•	nature of a manager, member son.	or authorized	
			Secretary of State use only
Sigr Typ	nature <u>Shanh MwOnce</u> ed Name: <u>Shana McQueen</u>		IDAHO SECRETARY OF STATE 11/14/2014 05:00 CK:101 CT:303196 BH:1449317 16 100.00 = 100.00 ORGAN LLC
Signature			W194330
	ed Name:		W 14 1 2 00

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