



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2013 MAR 22 AM 9:21

1. The name of the limited liability company is:

Living Balance Nutrition, LLC

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

39 E. State Ave., Meridian, ID 83642

(Street Address)

(Mailing Address, if different than street address)

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

Karen Christensen

(Name)

2095 Waltman St., Meridian, ID 83642

(Street Address)

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

Name

Address

Karen Christensen

2095 Waltman St., Meridian, ID 83642

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

2095 Waltman St., Meridian, ID 83642

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

Signature of a manager, member or authorized person.

Signature

Karen Christensen

Typed Name: Karen Christensen

Signature

Typed Name: _____

Secretary of State use only

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03/22/2013 05:00
CK: 1006 CT: 200993 DH: 1366013
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