



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2016 FEB 10 AM 10:47

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

FitMomRules, LLC

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

709 N Bacon Drive, Boise, ID 83712

(Street Address)

(Mailing Address, if different than street address)

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

Summer Walters

(Name)

709 N Bacon Drive, Boise, ID 83712

(Street Address)

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

Name

Address

Summer Walters

709 N Bacon Drive, Boise, ID 83712

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

709 N Bacon Drive, Boise, ID 83712

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

Signature of a manager, member or authorized person.

Signature 

Typed Name: Summer Walters

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

02/10/2016 05:00

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