

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013-JUL -2 AM 9: 03

SECRETARY OF STATE STATE OF IDAHO

1. The name of the limited liability	y company is:	OWIT OF IDAM	
Thrive Now Endeavors, L.L.C.			
2. The complete street and mailin 5632 N. McCarthy Ave.  (Street Address)	g addresses of the initial o	designated office:	
Boise, ID 83713 (Mailing Address, if different than street address)	ess)		
3. The name and complete street	address of the registered	agent:	
Tamara Thom (Name)		Boise, ID 83713	
The name and address of at leacompany:	,	er of the limited liability	
<u>Name</u>		Address	
Tamara Thorn	5632 N. McCarthy Ave.	, Boise, ID 83713	
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5. Mailing address for future corres		notices):	
6. Future effective date of filing (or	otional):		
Signature of a manager, member person.	or authorized		
Signature <u>Jamas Jao</u>	M	Secretary of State use only	
Typed Name: Tamara Thorn			
Signature		IDAHO SECRETARY OF STATE  07/02/2013 05:00  CK: 21120932474 CT: 284942 BH: 1380594  1 0 100.00 = 100.00 ORGAN LLC # 2  1 0 20.00 = 20.00 EXPEDITE C # 3	
Гуреd Name:			

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