



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 MAY 19 PM 4: 56

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

WHOLE LIFE UNLIMITED LLC.

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

507 S Fitness Place, #100 Eagle, Idaho 83616

(Street Address)

(Mailing Address, if different than street address)

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

Nathan Cooney

(Name)

507 S. Fitness Place, #100 Eagle, Idaho 83616

(Street Address)

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

Name

Address

Nathan Cooney

507 S. Fitness Place, #100 Eagle, Idaho 83616

Jared Lynch

507 S. Fitness Place, #100 Eagle, Idaho 83616

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

507 S. Fitness Place, #100 Eagle, Idaho 83616

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Nathan Cooney

Signature

Typed Name: Jared Lynch

Secretary of State use only

IDAHO SECRETARY OF STATE
05/20/2011 05:00
CK: 682589 CT: 172899 BH: 1274528
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