



# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

**FILED EFFECTIVE**  
3 22 AM 9:05

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

**ARTEMESIAN ENTERPRISES, L.L.C.**

- 2. The street address of the initial registered office is:**

**226 W. 14th Street, Idaho Falls, Idaho 83402**

and the name of the initial registered agent at the above address is:

**Robert L. Zaladonis**

3. The mailing address for future correspondence is:

**226 W. 14th Street, Idaho Falls, Idaho 83402**

4. Management of the limited liability company will be vested in:

Manager(s) ☒ or Member(s) ☐ (please check the appropriate box)

5. If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member.

Name

**Address**

Robert L. Zaladonis

226 W. 14th Street, Idaho Falls, Idaho 83402

6. Signature of at least one person responsible for forming the limited liability company:

**Signature:**

Typed Name: Robert L. Zaladonis

Capacity: Manager

**Signature**

**Typed Name:**

**Capacity:**

**Secretary of State use only**

Completed LLC formation organization p65  
 Received 07/20/02

IDAHO SECRETARY OF STATE  
03/22/2007 05:00  
CK: 51305 CT: 1646 DH: 1041862  
1 @ 100.00 = 100.00 ORGAN LLC # 2

### Web Form

W 60717