



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

11 JUN 24 AM 9:03

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

The Artesians I LLC

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

412 8th Avenue South, Apartment #B, Nampa, Idaho 83651
(Street Address)

(Mailing Address, if different than street address)

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

Kelly D. Miller
(Name)

412 8th Ave. S., Apartment #B
Nampa, Idaho 83651
(Street Address)

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

<u>Name</u>	<u>Address</u>
<u>Kelly D. Miller</u>	<u>412 8th Ave. S., Apartment #B Nampa, Idaho 83651</u>
_____	_____
_____	_____
_____	_____
_____	_____

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

412 8th Ave. S., Apt. #B, Nampa, Idaho 83651

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature Kelly D. Miller
Typed Name: Kelly D. Miller, Member

Signature _____
Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
06/24/2011 05:00
CK: 7582 CT: 139243 BH: 1279888
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