



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 FEB 28 AM 8:40

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

ArteParte LLC

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

18119 Royal Way, Nampa, Idaho 83687

(Street Address)

(Mailing Address, if different than street address)

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

Joseph R Arte

(Name)

18119 Royal Way, Nampa, Idaho 83687

(Street Address)

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

NameAddress

Joseph R Arte

18119 Royal Way, Nampa, Idaho 83687

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

18119 Royal Way, Nampa, Idaho 83687

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Manager _____

Secretary of State use only

Signature _____

Typed Name: _____

IDAHO SECRETARY OF STATE
02/28/2012 05:00
CK: 5894677383 CT: 267589 RH: 1312565
1 @ 100.00 = 100.00 ORGAN LLC # 2

W 111483