



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

09 DEC 31 AM 9:00

1. The name of the limited liability company is:

SECRETARY OF STATE

GALLERY NORTHWEST - COEUR d'ALENE, ID

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

217 SHERMAN AVENUE

(Street Address)

COEUR d'ALENE, ID 83814

(Mailing Address, if different than street address)

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

HILDA Bradshaw

(Name)

217 E Sherman Ave COA ID 83814

(Street Address)

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

Name

Address

HILDA BRADSHAW

217 E SHERMAN AVE, COEUR d'ALENE, ID 83814

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

217 SHERMAN AVE. COEUR d'ALENE, ID 83814

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 Hilda H. Bradshaw

Typed Name: HILDA H. BRADSHAW

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008

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12/31/2009 05:00
CK: NO CK# CT: 243446 BH: 1201209
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