



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

11 MAY 11 AM 8:29

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

A Taste of Art, LLC

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

1882 Hwy 95 N.

(Street Address)

Grangeville, ID 83530

(Mailing Address, if different than street address)

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

Stephanie Duclos

(Name)

1882 Hwy 95 N., Grangeville, ID 83530

(Street Address)

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

Name

Address

Stephanie Duclos

1882 Hwy 95 N., Grangeville, ID 83530

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

1882 Hwy 95 N., Grangeville, ID 83530

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

Signature of a manager, member or authorized person.

Signature Stephanie Duclos

Typed Name: Stephanie Duclos

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
05/11/2011 05:00
CK: 1014 CT: 254774 BH: 1273173
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