



# CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 SEP -6 PM 1:44

1. The name of the limited liability company is:

ItalianToGo.co, LLC

SECRETARY OF STATE  
STATE OF IDAHO

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

122 12th AVE S, NAMPA ID 83651

(Street Address)

(Mailing Address, if different than street address)

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

PETER S MICELI

(Name)

122 12th AVE S, NAMPA ID 83651

(Street Address)

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

**Name**

**Address**

PETER S MICELI

122 12TH AVE S, NAMPA ID 83651

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

122 12TH AVE S, NAMPA ID 83651

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

Typed Name: PETER S MICELI

Signature

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
09/06/2011 05:00  
CK: 1000 CT: 262199 DN: 1269297  
1 @ 100.00 = 100.00 ORGAN LLC # 2

W106464