



0004105179

**STATE OF IDAHO****Office of the secretary of state, Lawrence Denney
FOREIGN REGISTRATION STATEMENT (LIMITED
LIABILITY COMPANY)**

Idaho Secretary of State
PO Box 83720
Boise, ID 83720-0080
(208) 334-2301
Filing Fee: \$100.00

For Office Use Only

-FILED-

File #: 0004105179

Date Filed: 12/21/2020 3:08:19 PM

| Foreign Registration Statement (Limited Liability Company) | | | | | | | | |
|---|---|---------------------------------------|------|-------|---------|------------------------|---------|---------------------------------------|
| Select one: Standard, Expedited or Same Day Service (see descriptions below) | | Standard (filing fee \$100) | | | | | | |
| 1. The name this limited liability company will use in Idaho is: | | | | | | | | |
| Type of Limited Liability Company | Foreign Limited Liability Company | | | | | | | |
| Entity name | Artesian Square Asset Managers, LLC | | | | | | | |
| 2. Home Jurisdiction | | | | | | | | |
| The jurisdiction of formation is: | INDIANA | | | | | | | |
| 3. The street address of its domestic principal office (if required by the laws of the jurisdiction of formation) is: | | | | | | | | |
| Street Address | 1600 SOUTH OHIO STREET MARTINSVILLE, IN 46151 | | | | | | | |
| 4. The mailing address of its domestic principal office (if required by the laws of the jurisdiction of formation) is: | | | | | | | | |
| Mailing Address | 1600 SOUTH OHIO STREET MARTINSVILLE, IN 46151 | | | | | | | |
| 5. The complete street address of the principal office is: | | | | | | | | |
| Principal Office Address | 460 E. SUN VALLEY ROAD SUITE 207 KETCHUM, ID 83340 | | | | | | | |
| 6. The mailing address of the principal office is: | | | | | | | | |
| Mailing Address | PO BOX 4139 KETCHUM, ID 83340-4101 | | | | | | | |
| 7. Registered Agent Name and Address | | | | | | | | |
| Registered Agent | GIVENS PURSLEY CORPORATE SERVICES LLC Commercial Registered Agent Physical Address 601 W BANNOCK ST BOISE, ID 83702 Mailing Address 601 W BANNOCK ST BOISE, ID 83702 | | | | | | | |
| <input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity. | | | | | | | | |
| 8. Governors | | | | | | | | |
| <table border="1"><thead><tr><th>Name</th><th>Title</th><th>Address</th></tr></thead><tbody><tr><td>ROBERT A KANTOR KANTOR</td><td>Manager</td><td>PO BOX 4139 KETCHUM, ID 83340-4101</td></tr></tbody></table> | | | Name | Title | Address | ROBERT A KANTOR KANTOR | Manager | PO BOX 4139 KETCHUM, ID 83340-4101 |
| Name | Title | Address | | | | | | |
| ROBERT A KANTOR KANTOR | Manager | PO BOX 4139 KETCHUM, ID 83340-4101 | | | | | | |
| Signature of individual authorized by the entity to sign: | | | | | | | | |
| <u>ROBERT A KANTOR</u> | | <u>12/22/2020</u> | | | | | | |
| Sign Here | | Date | | | | | | |
| Job Title: Manager | | | | | | | | |

B0562-9293 12/22/2020 12:18 PM Received by ID Secretary of State Lawrence Denney



State of Indiana
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

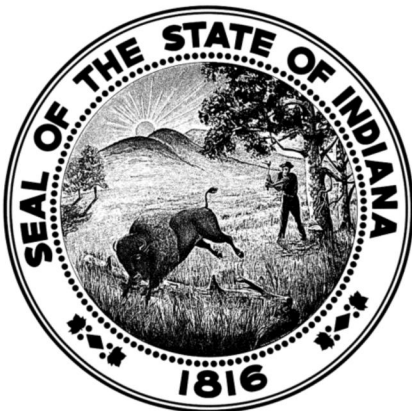
I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

ARTESIAN SQUARE ASSET MANAGERS, LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on August 24, 2018, and was in existence or authorized to transact business in the State of Indiana on December 21, 2020.

I further certify this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, December 21, 2020

Connie Lawson

CONNIE LAWSON
SECRETARY OF STATE

201808241274935 / 20201770959

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on January 20, 2021.