state of Minnesota

SECRETARY OF STATE

CERTIFICATE OF INCORPORATION

I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: Articles of Incorporation, duly signed and acknowledged under oath, have been filed on this date in the Office of the Secretary of State, for the incorporation of the following corporation, under and in accordance with the provisions of the chapter of Minnesota Statutes listed below.

This corporation is now legally organized under the laws of Minnesota.

Corporate Name: National Association of Recreation Resource Planners

Corporate Charter Number: 565378-2

Chapter Formed Under: 317A

This certificate has been issued on 07/17/2003.



Mary Hiffmayer
Secretary of State.





STATE OF MINNESOTA SECRETARY OF STATE

ARTICLES OF INCORPORATION Business and Nonprofit Corporations

The state of the s	PLEASE TYPE OR PRINT LE	EGIBLY IN BLA	ACK INK.				
Please read the direction	s on the reverse side before co	mpleting this f	orm. All ir	formation on th	is form is pub	lic infori	mation.
The undersigned incorpor to form a (mark ONLY on	rator(s) is an (are) individual(s) e):	18 years of ac	ge or olde	r and adopt the	following artic	des of ir	ncorporation
FOR-PROFIT BU	SINESS CORPORATION (Cha	apter 302A)	X	NONPROFIT	CORPORATIO)N (Cha	pter 317A)
	AR	TICLE I N	IAME				
	ation of Recreation F						
(Business Corporation na abbreviation of one of the	mes must include a corporate se words.)	designation su	ch as Inc	orporated, Corp	oration, Comp	any, Lir	nited or an
	ARTICLE II REGISTE	RED OFFIC	E ADDR	RESS AND A	GENT		
The registered office addi	ress of the corporation is:		Whi	te Bear La	.ke N	ΛN	55110
(A complete street addres	s or rural route and rural route	box number is	required;	the address ca			
The registered agent at the	ne above address is:				STATE	OF M RTMEN FIL	INNESO T OF STATE ED
Name (Note: You are not	required to have a registered a	agent.)			JL	JL 1'	7 2003
	ARTI	ICLE III SI	HARES		9h	ang K	House
The corporation is authori (If you are a business con	ized to issue a total of poration you must authorize at	shares. least one share	e. Nonpro	fit corporations	Se are not require	cretary ed to ha	of State ve shares.)
	ARTICLE	IV INCOR	PORAT	ORS			
these articles is true and criminal penalties will app	ncorporator(s) certify that I am a correct. I (We) also understand ly as if I (we) had signed these st sign below. List the incorpora	I that if any of t articles under	this inform oath. (Pr	nation is intention ovide the name	nally or knowi and address	ingly mi: of each	sstated that incorpora-
Julia Cuchna	2387 Elm Drive	White Bear Lal	ke MN	55110	Lulia	Cu	chna
Name	Street	City	State	Zip	Signature		
Name	Street	City	State	Zip	Signature		
Print name and phone nu	mber of person to be contacted	d if there is a q	uestion a	bout the filing o	f these articles	3.	
Julia Cuchna			,651	, 398-106	7		

Phone Number

Name