

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

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 APR 28 PM 1:54

SECKETARY OF STATE STATE OF IDAHO

1. The name of the limited liability of	company is:			
	Boise Vintage Cy	cle, LLC		
2. The complete street and mailing	addresses of t		ignated/principal	office:
(Street Address)	•			
(Mailing Address, if different than street address	B)			<u> </u>
3. The name and complete street a	ddress of the r	egistered ag	ent:	
Curt Mastrude	•	3210 N. 36th Si	., Boise, ID 83703	
(Name)	(Street Addres			
company:  Name  Curt Mastrude	one member or manager of the limited liability  Address 3210 N. 36th St., Boise, ID 83703			
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			•	*
				<u> </u>
				er y
5. Mailing address for future corresp 4735.0	oondence (ann Chinden Blvd., Boi	•	tices):	
6. Future effective date of filing (optional):				
ignature of organizer(s). (An organizer	is a member, or is	· •		
cting in behalf of a member or members).	a-11		Secretary of State use	only
ignature Will Was	tack.	IK. PMO	• **	
yped Name: Curt Mastrude	<u> </u>	ert_org	<b>75</b> .844	· 
Signature		LLC formstear_org_Rt.PMD 1 07/2006	IDAHO SE 84/28/; CX: CASH CT: 1 8 189,88 =	CRETARY OF STATE 2009 05 a 6 236568 BM: 1168

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