

State of Idaho

Department of State

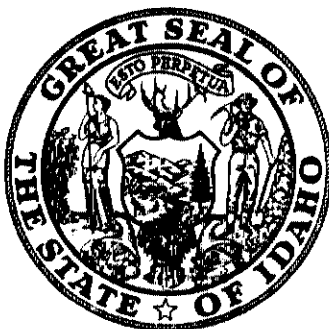
CERTIFICATE OF INCORPORATION OF

MAGIC VALLEY CUTTING HORSE ASSOCIATION, INC.

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that duplicate originals of Articles of Incorporation for the incorporation of MAGIC VALLEY CUTTING HORSE ASSOCIATION, INC. duly signed pursuant to the provisions of the Idaho Nonprofit Corporation Act, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Incorporation and attach hereto a duplicate original of the Articles of Incorporation.

Dated: September 7, 1993



Pete T. Cenarrusa
SECRETARY OF STATE

By *[Signature]*

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SEC. OF STATE
SEP 10 36

**ARTICLES OF INCORPORATION OF
MAGIC VALLEY CUTTING HORSE ASSOCIATION, INC.**

THE UNDERSIGNED, acting as incorporators of a nonprofit corporation under the Idaho Nonprofit Corporation Act, adopt the following Articles of Incorporation for such nonprofit corporation.

FIRST: The name of the corporation is Magic Valley Cutting Horse Association., Inc.

SECOND: The period of its duration is perpetual.

THIRD: The purpose or purposes for which the nonprofit corporation is organized are: All the purposes permitted a nonprofit corporation under the Idaho Nonprofit Corporation Act including, but not limited to:

- (a) Encourage and promote cutting horse competition.
- (b) Formulate rules for fair and safe competition among the contestants.
- (c) Have and to exercise any other powers necessary to effect the provisions of (a) and (b) above.

FOURTH: Provisions for regulation of the internal affairs of the corporation shall be bylaws adopted and amended from time to time by members and/or the Board of Directors, and the number of votes required to amend the bylaws by the Directors shall be four of the five elected.

FIFTH: The address of the initial registered office of the corporation shall be 317 6th Avenue North, Twin Falls, Idaho 83301, and the name of the initial registered agent at such address is Harry De Haan.

SIXTH: Upon dissolution of the corporation, all assets will be distributed equally among the membership.

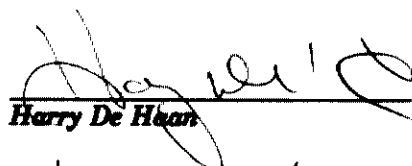
SEVENTH: The number of directors constituting the Board of Directors of the corporation shall be five. The number may be changed by bylaws of the corporation. The

names and addresses of the persons who are to serve as directors until the first annual meeting of the members shall be:

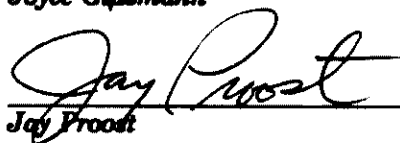
| NAME | ADDRESS |
|----------------|--|
| Harry De Haan | Route 1, Filer, Idaho 83328 |
| Joyce Glasmann | 3043 East 3400 North, Twin Falls, Idaho |
| Jay Proost | 4060 North Canyon Ridge Dr., Twin Falls, Idaho 83301 |

EIGHTH: The names and addresses of the incorporators are:

| NAME | ADDRESS |
|----------------|--|
| Harry De Haan | Route 1, Filer, Idaho 83328 |
| Joyce Glasmann | 3043 East 3400 North, Twin Falls, Idaho 83301 |
| Jay Proost | 4060 North Canyon Ridge Dr., Twin Falls, Idaho 83301 |


Harry De Haan


Joyce Glasmann


Jay Proost

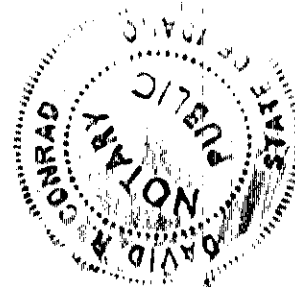
STATE OF IDAHO)
)ss.
COUNTY OF TWIN FALLS)

On this the 26th day of August, 1993, before me, the undersigned, a Notary Public in and for said County and State, personally appeared **HARRY DE HAAN**, known to me to be the person whose name is affixed to the foregoing instrument and he acknowledged to me that he executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.



NOTARY PUBLIC FOR IDAHO
Residing at: Fruer, Idaho
Commission Expires: 3-5-97



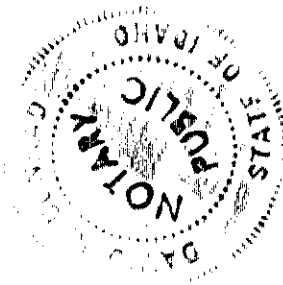
STATE OF IDAHO)
)ss.
COUNTY OF TWIN FALLS)

On this the 26th day of August, 1993, before me, the undersigned, a Notary Public in and for said County and State, personally appeared **Joyce Glasmann**, known to me to be the person whose name is affixed to the foregoing instrument and she acknowledged to me that she executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.



NOTARY PUBLIC FOR IDAHO
Residing at: Fruer, Idaho
Commission Expires: 3-5-97



STATE OF IDAHO

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)ss.

COUNTY OF TWIN FALLS

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On this the 26 day of August, 1993, before me, the undersigned, a Notary Public in and for said County and State, personally appeared **Jay Proost**, known to me to be the person whose name is affixed to the foregoing instrument and she acknowledged to me that she executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.


NOTARY PUBLIC FOR IDAHO

Residing at: Fluor, Idaho

Commission Expires: 3-5-97

