





## STATE OF IDAHO

Office of the secretary of state, Lawerence Denney FOREIGN REGISTRATION STATEMENT (BUSINESS CORPORATION)

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

-FILED-

File #: 0004175631

02/18/2021

Date

Date Filed: 2/18/2021 1:08:31 PM

| Select           | egistration Statement (Business<br>one: Standard, Expedite<br>ptions below) | s Corporation)<br>ed or Same Day Service (s               | see Standard (filing fee \$100)                                       |  |
|------------------|---|---|---|--|
| 1. The nar       | me this business corporation wi   | ll use in Idaho is:                                       |   |  |
| Type o           | of Corporation  |   | Foreign Business Corporation  |  |
| Entity           | name  |   | Wild Rye Inc.   |  |
| The na<br>Wild R |   | oration in its home jurisdic                              | tion as shown on the attached certificate of existence/good standing: |  |
|                  |   | of a Certificate of Exister<br>otion dated within 90 days |   |  |
| 2. Home J        | lursidiction  |   |   |  |
| The ju           | risdiction of formation is:   |   | DELAWARE  |  |
| 3. The stre      | eet address of its domestic princ   | cipal office (if required by the law                      | s of the jurisdiction of formation) is:                               |  |
| Street Address   |   |   | None  |  |
|                  | iling address of its domestic pri<br>g Address                              | ncipal office (if required by the la                      | ws of the jurisdiction of formation) is:  None                        |  |
| 5. The cor       | nplete street address of the prin   | ncipal office is:   |   |  |
| Princip          | oal Office Address  |   | 360 E 9TH STREET, UNIT 2<br>KETCHUM, ID 83340                         |  |
| 6. The ma        | iling address of the principal off  | îce is:   |   |  |
| Mailing Address  |   |   | PO BOX 5350<br>KETCHUM, ID 83340-5378                                 |  |
| 7. Registe       | red Agent Name and Address  |   |   |  |
| Registered Agent |   |   | Registered Agent  |  |
|                  |   |   | CASSIE ABEL   |  |
|                  |   |   | Physical Address: 360 E 9TH STREET, UNIT 2                            |  |
|                  |   | KETCHUM, ID 83340   |   |  |
| Mailing Address: |   |   |   |  |
|                  | PO BOX 5350   |   |   |  |
|                  | KETCHUM, ID 83340-5378  |   |   |  |
| <b>⊠</b> 1a      | affirm that the registered a  | agent appointed has cons                                  | ented to serve as registered agent for this entity.                   |  |
| 8. Govern        | ors   |   |   |  |
|                  | Name  | Title   | Address   |  |
| Cassi            | ie Abel   | President   | 120 SHORT SWING LANE A,   |  |

KETCHUM, ID 83340

CASSIE ABEL

Sign Here

Signature of individual authorized by the entity to sign:



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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WILD RYE INC." IS DULY INCORPORATED

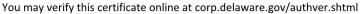
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TENTH DAY OF FEBRUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

5054589 8300 SR# 20210405289





Authentication: 202483841

Date: 02-10-21