

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

	UNITED LIABILIT	Y COMPANY	
	(Instructions on back	of application)	SECA. STATE
1. T	he name of the limited liability com	pany is:	STATE OF IDAGO
	Rid	es by Wheels LLC	
	he complete street and mailing add 4349 Venture Circle (Street Address)	resses of the initial d	esignated office:
j	Meridian, Idaho 83646 (Mailing Address, if different than street address)	<u>-</u>	<u></u>
3. T	The name and complete street address of the registered agent:		
_	Norris T. Wheeler	4349 Venture Circle, Me	ridian, Idaho 83646
7	(Name)	(Street Address)	
	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u> Norris T. Wheeler	4349 Venture Circle, Me	Address
-	1. 11100001	4040 Venture Oncie, Inte	sidali, idalio 00040
-			
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-			
-		<u></u>	
5. M	lailing address for future correspon	donce (appual report	notices)
	Mailing address for future correspondence (annual report notices):		
-	4349 Venture Circle, Meridian, Idaho 83646		
6. F	uture effective date of filing (optiona	al):	
			<del></del>
Signa	iture of a manager, member or	authorized	
perso			Secretary of State use only
Signa	ture forces T. Ake	elec	
Typed	Name: Norris T. Wheeler		
O!	<b>4</b>		IDAHO SECRETARY OF STATE
	ture		12/13/2011 95:00 CK: 11463 CT: 93826 BH: 1301583
Typed	l Name:		CV: TT403 CI: 330CP DM: 13015M2

CK: 11463 CT: 93826 BH: 1301583 1 8 190.08 = 100.00 DRGAN LLC # 2