

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 11 MAY 25 AM 9: 14

FILED EFFECTIVE

(Instructions on back of application)

	(	CEOSE 1 OF OF OR	
1.	The name of the limited liability con	SECRETARY OF STATE  STATE OF IDAHO	
Buhl Sagebrush Days Rodeo, LLC			
2.	The complete street and mailing addresses of the initial designated/principal office: 1413 South 1600 East		
	(Street Address) Gooding, Id. 83330		
	(Mailing Address, if different than street address)		
3.	3. The name and complete street address of the registered agent:		
	Juanita O'Maley	1413 South 1600 East, Gooding, Id. 83330	
	(Name)	(Street Address)	
<b>4</b> .	4. The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>	Address	
	Juanita O'Maley	1413 South 1600 East, Gooding, Id. 83330	
5. Mailing address for future correspondence (annual report notices):		ndence (annual report notices):	
-	1413 South 1600 East, Gooding, Id. 83330		
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6	6. Future effective date of filing (optional):		
o. I didic checulve date of him g (optional).			
Signature of a manager, member or authorized			
per	son.	Secretary of State use only	
Cia	noting & 10 mg	, Pa	
Signature (Kuanita O'Maley			
ıyp	ped Name: Juanita O'Maley		
۵.		IDAHO SECRETARY OF STATE 95/25/2011 95:00	
CK: 3475 CT: 245854 BH: 1275319			
Typed Name: 1 8 188.88 = 188.88 UNDHA LLC # 2			

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