

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

(Instructions on back of application)

10 JUN -4 PM 4: 15

SECRETARY DE STATE

		STA	TE OF IDAHO
<ol> <li>The name of the limited liability co</li> </ol>	mpany is:		ייי טי וואחו
J. Company	Bull Market Ride L	.LC	
2. The complete street and mailing ac	ddresses of the	initial designated/princip	oal office:
623 S. Am	nericana Blvd, Boi	se, ID 83702	e. Page
(Street Address)			
(Mailing Address, if different than street address)	·		
The name and complete street add	iress of the reg	istered agent:	
,	_		W
Jason Galloway		. Americana Blvd, Boise, ID 8	3702
(Name)	(Street Address)		
. The name and address of at least o	ona mambar ar	· manager of the limited !	iahilihu
company:	one member O	manager or the initiou i	iaviiity
<u>Name</u>		Address	
Jason Galloway	623 S. Americana Blvd, Boise, ID 83702		
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·	•		
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·			
		;	
Mailing address for future correspo	ndence (annua	il report notices):	
<u>Same</u>			
Future effective date of filing (optional):		•	
. Lilie Girotito date of hing topic			
gnature of organizer(s). (An organizer is	a member or is		
ing in behalf of a member or members).			
0 10 10 0		Secretary of State L	se only
gnature 2m Ma/Mm/		IDAHO SE 8007/10 CK: 451237 CT: 1 9 199.89 :	
ped Name: Jason Galloway		 	
		1040 SE	CRETARY OF STATE
gnature		451237 CT	172899 BH: 1295
ped Name:	[ ]	5 6	THE SEE STREET IT