

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 MAY -6 PM 2:49

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Idaho Motorcycle Experience, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

141 Main Street, Donnelly, Idaho 83615

(Street Address)

PO Box 600, Donnelly, Idaho 83615

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Christopher Kirk

(Name)

64 Ilka Lane, McCall, Idaho 83638

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Cyndi Bonetti

Address

64 Ilka Lane, McCall, Idaho 83638

5. Mailing address for future correspondence (annual report notices):

PO Box 683, McCall, Idaho 83636

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature _____

Typed Name: Christopher P Kirk

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
05/06/2010 05:00
CK: 432797 CT: 172899 DN: 1221124
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