

355 0810 555

Receipt Number: 1738866

File Number **DL015223**



**ARTICLES\_OF\_ORGANIZATION**

For

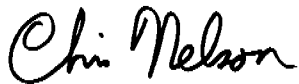
**WEST STABLES, LLC**

Filed at the request of:

**JAMES R DAVIES  
PO BOX 277  
ALEXANDRIA SD 57311**

*State of South Dakota  
Office of the Secretary of State*

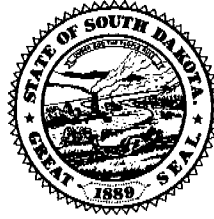
Filed in the office of the Secretary of State on: **Monday, December 10, 2007**



Secretary of State

Fee Received: \$125.00

# State of South Dakota



## OFFICE OF THE SECRETARY OF STATE

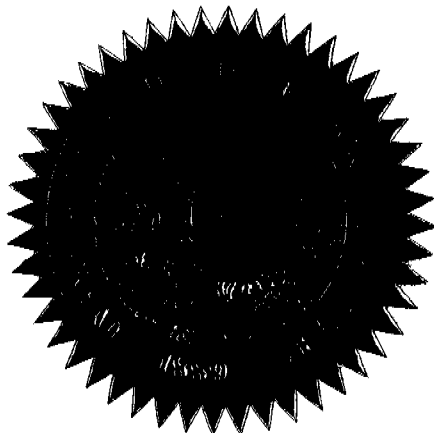
### Certificate of Organization Limited Liability Company

ORGANIZATIONAL ID #: DL015223

I, Chris Nelson, Secretary of State of the State of South Dakota, hereby certify that the Articles of Organization of **WEST STABLES, LLC** duly signed and verified, pursuant to the provisions of the South Dakota Limited Liability Company Act, have been received in this office and are found to conform to law.

**ACCORDINGLY** and by virtue of the authority vested in me by law, I hereby issue this Certificate of Organization and attach hereto a duplicate of the Articles of Organization.

**IN TESTIMONY WHEREOF**, I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this December 10, 2007.



*Chris Nelson*

Chris Nelson  
Secretary of State

355 0812

Filed this 10th day of Dec, 2007

*Chris Nelson*  
SECRETARY OF STATE

**ARTICLES OF ORGANIZATION**

**OF**

**"West Stables, LLC"**

**RECEIVED**

**DEC 10 2007**

**S.D. SEC. OF STATE**

**A SOUTH DAKOTA LIMITED LIABILITY COMPANY**

**ARTICLE 1: NAME**

The name of the limited liability company shall be "West Stables, LLC".

**ARTICLE 2: PURPOSE**

This limited liability company is formed for the purpose of raising, training, breeding, running, caring for, buying, and selling race horses, and all incidental and necessary activities relating thereto, and may also engage in any other lawful business purpose which the members shall from time to time determine to undertake.

**ARTICLE 3: DURATION**

The company's existence shall be perpetual.

**ARTICLE 4: INITIAL DESIGNATED OFFICE**

The address of the initial designated office is 26087 - 413<sup>th</sup> Avenue, Ethan SD 57334.

**ARTICLE 5: PRINCIPAL OFFICE**

The address of the principal office is 26087 - 413<sup>th</sup> Avenue, Ethan SD 57334.

**ARTICLE 6: INITIAL AGENT**

The name and address of the initial agent for service of process is Roger Riggs, 26087 - 413<sup>th</sup> Avenue, Ethan SD 57334.

*DL 15223*





2008

ANNUAL REPORT  
DOMESTIC L.L.C.

Secretary of State Office  
500 E Capitol Ave  
Pierre, SD 57501  
(605)773-4845

Please Type or Print Clearly in Ink

FILING FEE: \$50 Make check payable to SECRETARY OF STATE

FILE DATE	2-27-09
RECEIPT NO	1885492
	RECEIVED
	FEB 27 2009
	S.D. SEC. OF STATE

1. L.L.C. Name, Registered Agent Name and Address:



\*DL015273\*  
DL015223 DEC/0000  
WEST STABLES, LLC  
RIGGS, ROGER  
26087 413TH AVENUE  
ETHAN SD 57334-7507

Telephone #	_____
FAX #	_____
FILING DATE: Due during the month the Certificate of Organization was issued, and delinquent after the last day of the following month.	

2. The address of the principal executive office in or out of the State of South Dakota.

26087 - 413th Avenue	Ethan	SD	57334
Street Address	City	State	ZIP+4
Mailing Address (Optional)	City	State	ZIP+4

3. The name of the South Dakota Registered Agent

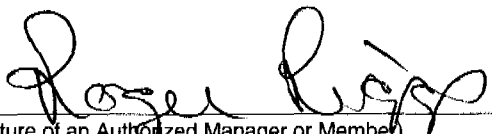
Roger Riggs

26087 - 413th Avenue	Ethan	SD	57334
Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
Mailing Address (Optional - Required to be a South Dakota Address)	City	State	ZIP+4

4. The names and business addresses of its managers. If the L.L.C. is member-managed the names and addresses of the members need not be set forth.

Roger Riggs	26087 - 413th Avenue	Ethan	SD	57334
Manager	Street Address	City	State	ZIP+4
D. Gene Riggs	41304 - 264th Street	Ethan	SD	57334
Manager	Street Address	City	State	ZIP+4
Manager	Street Address	City	State	ZIP+4

Dated 2-26-09

  
 \_\_\_\_\_  
 (Signature of an Authorized Manager or Member)  
 Roger Riggs  
 \_\_\_\_\_  
 (Printed Name)  
 Registered Agent  
 \_\_\_\_\_  
 (Title)

Secretary of State Office  
500 E Capitol Ave  
Pierre, SD 57501  
(605)773-4845

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

**FILING FEE: \$10** Make check payable to SECRETARY OF STATE

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity \_\_\_\_\_  
\_\_\_\_\_

2. The name of the registered agent on file \_\_\_\_\_

The name of the successor registered agent \_\_\_\_\_

3. If listing a Commercial Registered Agent, please state their identification number: \_\_\_\_\_

4. The address of the agent currently on file for this entity

Street Address (Required)	City	State	ZIP+4
---------------------------	------	-------	-------

Mailing Address (Optional)	City	State	ZIP+4
----------------------------	------	-------	-------

5. If the address has changed, its new address

Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
--	------	-------	-------

Mailing Address (Optional – Required to be a South Dakota Address)	City	State	ZIP+4
--	------	-------	-------

6. The address of its registered office and the address of the business office of its registered agent, as changed, must be identical.

Dated \_\_\_\_\_

\_\_\_\_\_  
(Signature of an authorized officer)

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Title)

2009

Secretary of State Office  
500 E Capitol Ave  
Pierre, SD 57501  
(605)773-4845

ANNUAL REPORT  
DOMESTIC L.L.C.

Please Type or Print Clearly in Ink

FILING FEE: \$50 Make check payable to SECRETARY OF STATE

FILE DATE	02/19/10
RECEIPT NO	2000122
<b>RECEIVED</b>	
FEB 19 2010	
S.D. SEC. OF STATE	

1. L.L.C. Name, Registered Agent Name and Address:



\* D L O 1 5 2 2 3 \*  
DL015223 DEC/2008  
WEST STABLES, LLC  
RIGGS, ROGER  
26087 413TH AVENUE  
ETHAN SD 57334-7507

Telephone #	_____
FAX #	_____
FILING DATE: Due during the month the Certificate of Organization was issued, and delinquent after the last day of the following month.	

2. The address of the principal executive office in or out of the State of South Dakota.

26087 -- 413th Avenue	Ethan	SD	57334
Street Address	City	State	ZIP+4
Mailing Address (Optional)			
	City	State	ZIP+4

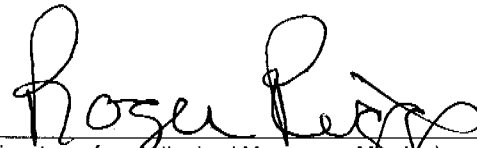
3. The name of the South Dakota Registered Agent Roger Riggs

26087 - 413th Avenue	Ethan	SD	57334
Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
Mailing Address (Optional - Required to be a South Dakota Address)			
	City	State	ZIP+4

4. The names and business addresses of its managers. If the L.L.C. is member-managed the names and addresses of the members need not be set forth.

Roger Riggs	26087 - 413th Avenue	Ethan	SD	57334
Manager	Street Address	City	State	ZIP+4
D. Gene Riggs	41304 - 264th Street	Ethan	SD	57334
Manager	Street Address	City	State	ZIP+4
Manager	Street Address	City	State	ZIP+4

Dated \_\_\_\_\_

  
 \_\_\_\_\_  
 (Signature of an Authorized Manager or Member)

Roger Riggs  
 \_\_\_\_\_  
 (Printed Name)

Registered Agent  
 \_\_\_\_\_  
 (Title)

302 0443

Secretary of State Office  
500 E Capitol Ave  
Pierre, SD 57501  
(605)773-4845

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

**FILING FEE: \$10** Make check payable to SECRETARY OF STATE

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity \_\_\_\_\_  
\_\_\_\_\_

2. The name of the registered agent on file \_\_\_\_\_

The name of the successor registered agent \_\_\_\_\_

3. If listing a Commercial Registered Agent, please state their identification number: \_\_\_\_\_

4. The address of the agent currently on file for this entity

\_\_\_\_\_  
Street Address (Required) City State ZIP+4

\_\_\_\_\_  
Mailing Address (Optional) City State ZIP+4

5. If the address has changed, its new address

\_\_\_\_\_  
Street Address (Required to be a South Dakota Address) City State ZIP+4

\_\_\_\_\_  
Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

6. The address of its registered office and the address of the business office of its registered agent, as changed, must be identical.

Dated \_\_\_\_\_

\_\_\_\_\_  
(Signature of an authorized officer)

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Title)

313 0167 11/22/2010

2010

Secretary of State Office  
500 E Capitol Ave  
Pierre, SD 57501  
(605)773-4845

ANNUAL REPORT  
DOMESTIC L.L.C.

Please Type or Print Clearly in Ink

FILING FEE: \$50 Make check payable to SECRETARY OF STATE

FILE DATE 11/17/10  
 RECEIPT NO 2086789  
**RECEIVED**  
**NOV 17 2010**  
**S.D. SEC. OF STATE**

Telephone # \_\_\_\_\_  
 FAX # \_\_\_\_\_  
 FILING DATE: Due during the month  
 the Certificate of Organization was  
 issued, and delinquent after the last  
 day of the following month.

1. L.L.C. Name, Registered Agent Name and Address:



\*DL015223\*  
DL015223 DEC/2009  
WEST STABLES, LLC  
RIGGS, ROGER  
26087 413TH AVENUE  
ETHAN SD 57334-7507

2. The jurisdiction under whose law it is formed South Dakota

3. The address of the principal executive office in or out of the State of South Dakota.

26087 - 413th Avenue Ethan SD 57334  
Street Address City State ZIP+4

Mailing Address (Optional) City State ZIP+4

4. The name of the South Dakota Registered Agent Roger Riggs

26087 - 413th Avenue Ethan SD 57334  
Street Address (Required to be a South Dakota Address) City State ZIP+4

Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

5. The names and business addresses of its managers. If the L.L.C. is member-managed the names and addresses of the members need not be set forth.

Roger Riggs 26087 - 413th Avenue Ethan SD 57334  
Manager Street Address City State ZIP+4

D. Gene Riggs 41304 - 264th Street Ethan SD 57334  
Manager Street Address City State ZIP+4

Manager Street Address City State ZIP+4

No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty.

Dated 11-16-2010

Roger Riggs  
(Signature of an Authorized Person)

Roger Riggs  
(Printed Name)

Secretary of State Office  
500 E Capitol Ave  
Pierre, SD 57501  
(605)773-4845

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

**FILING FEE: \$10** Make check payable to SECRETARY OF STATE

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity \_\_\_\_\_  
\_\_\_\_\_

2. The name of the registered agent on file \_\_\_\_\_

The name of the successor registered agent \_\_\_\_\_

3. If listing a Commercial Registered Agent, please state their identification number \_\_\_\_\_

4. The address of the agent currently on file for this entity

Street Address (Required)	City	State	ZIP+4
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Mailing Address (Optional)	City	State	ZIP+4
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5. If the address has changed, its new address

Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
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Mailing Address (Optional – Required to be a South Dakota Address)	City	State	ZIP+4
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6. The address of its registered office and the address of the business office of its registered agent, as changed, must be identical.

No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty.

Dated \_\_\_\_\_

\_\_\_\_\_  
(Signature of an Authorized Person)

\_\_\_\_\_  
(Printed Name)

2011

Enter Filing Year

ANNUAL REPORT

FILE 1/9/2013

RECEIPT NO 87075

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

DOMESTIC LLC

Please Type or Print Clearly In Ink

FILING FEE: \$50.00 Make check payable to SECRETARY OF STATE

1. L.L.C. ID and Name:
DL015223
WEST STABLES, LLC
26087 - 413TH AVENUE
ETHAN, SD 57334-7507

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

26087 - 413TH AVENUE ETHAN SD 57334-7507
Street Address City State ZIP+4

Mailing Address City State ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: ROGER RIGGS

26087 413TH AVENUE ETHAN SD 57334-7507
Street Address or Rural Route Box Number in This State and City State ZIP+4

Mailing Address in This State, if Different from Street Address City State ZIP+4

5. The names and business addresses of its managers. If the L.L.C. is member-managed, the names and addresses of the members need not be set forth.

Table with 5 columns: Manager, Street Address, City, State, ZIP+4. Contains three rows of manager information, each starting with an empty box.

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty. By signing this form you agree to have both the fee and the form processed electronically.

Date 01/09/2013

Signature Accepted Electronically

(Signature of an Authorized Person)

ROGER W RIGGS

(Printed Name)

2012

Enter Filing Year

ANNUAL REPORT

FILE 12/12/2013

RECEIPT NO 159697

Secretary of State Office  
500 E Capitol Ave  
Pierre, SD 57501  
(605)773-4845

DOMESTIC LLC

Please Type or Print Clearly In Ink

FILING FEE: \$50.00 Make check payable to SECRETARY OF STATE

1. L.L.C. ID and Name:  
DL015223  
WEST STABLES, LLC  
26087 - 413TH AVENUE  
ETHAN, SD 57334-7507

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

26087 - 413TH AVENUE ETHAN SD 57334-7507  
Street Address City State ZIP+4

Mailing Address City State ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: ROGER RIGGS

26087 413TH AVENUE ETHAN SD 57334-7507  
Street Address or Rural Route Box Number in This State and City State ZIP+4

Mailing Address in This State, if Different from Street Address City State ZIP+4

5. The names and business addresses of its managers. If the L.L.C. is member-managed, the names and addresses of the members need not be set forth.

<input type="checkbox"/>	Manager	Street Address	City	State	ZIP+4
<input type="checkbox"/>	Manager	Street Address	City	State	ZIP+4
<input type="checkbox"/>	Manager	Street Address	City	State	ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty. By signing this form you agree to have both the fee and the form processed electronically.

Date 12/12/2013

Signature Accepted Electronically

(Signature of an Authorized Person)

ROGER W RIGGS

(Printed Name)



2014

Enter Filing Year

ANNUAL REPORT

FILE DATE 3/13/2015

RECEIPT NO 281500

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

DOMESTIC LLC
Please Type or Print Clearly In Ink

FILING FEE: \$50.00 Make check payable to SECRETARY OF STATE

1. L.L.C. ID and Name:
DL015223
WEST STABLES, LLC
26087 - 413TH AVENUE
ETHAN, SD 57334-7507

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

26087 - 413TH AVENUE ETHAN SD 57334-7507
Street Address City State ZIP+4

Mailing Address City State ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: ROGER RIGGS

26087 413TH AVENUE ETHAN SD 57334-7507
Street Address or Rural Route Box Number in This State and City State ZIP+4

Mailing Address in This State, if Different from Street Address City State ZIP+4

5. The names and business addresses of its managers. If the L.L.C. is member-managed, the names and addresses of the members need not be set forth.

Manager Street Address City State ZIP+4

Manager Street Address City State ZIP+4

Manager Street Address City State ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty. By signing this form you agree to have both the fee and the form processed electronically.

Dated 03/13/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

JAMES R DAVIES

(Printed Name)

2015

ANNUAL REPORT

FILE DATE 11/17/2015

Enter Filing Year

DOMESTIC LLC

RECEIPT NO 352014

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

SDCL 47-34A-211

Please Type or Print Clearly In Ink

FILING FEE: \$50.00 Make check payable to SECRETARY OF STATE

1. L.L.C. ID and Name:

DL015223

WEST STABLES, LLC

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

26087 - 413TH AVENUE ETHAN SD 57334-7507
Actual Street Address or Rural Route Box Number City State ZIP+4

Mailing Address, if Different from Street Address City State ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: ROGER RIGGS

26087 413TH AVENUE ETHAN SD 57334-7507
Actual Street Address or Rural Route Box Number in This State City State ZIP+4

Mailing Address in This State, if Different from Street Address City State ZIP+4

5. The names and addresses of its managers (governors). If the LLC is member-managed, the names and addresses of the members (governors) need not be set forth.

Manager Actual Street Address City State ZIP+4

Manager Actual Street Address City State ZIP+4

Manager Actual Street Address City State ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.

Dated 11/17/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

JAMES R DAVIES

(Printed Name)

\*By signing this form you agree to have both the fee and the form processed electronically. A fee of up to \$40 will be assessed for returned payments.