

FOREIGN REGISTRATION STATEMENT

OF FOREIGN LIMITED LIABILITY COMPANY

ENTITY INFORMATION

ENTITY NAME:	RIDER CONCEPTS LLC
ENTITY ID:	23116864
ENTITY TYPE:	Foreign LLC
EFFECTIVE DATE:	08/08/2020
TRUE NAME IN FOREIGN DOMICILE:	Rider Concepts LLC
FOREIGN DOMICILE STATE:	Wyoming
DATE OF FORMATION IN FOREIGN DOMICILE:	08/04/2020
PURPOSE/CHARACTER OF BUSINESS:	Real Estate and Rental and Leasing
MANAGEMENT STRUCTURE:	Member-Managed
PROFESSIONAL SERVICES:	N/A
DESIGNATING FOREIGN COMPANY NAME:	N/A
DESIGNATING FOREIGN COMPANY DOMICILE:	N/A
DESIGNATING FOREIGN COMPANY DATE OF FORMATION IN FOREIGN DOMICILE:	N/A

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME:	Registered Agents Inc.
PHYSICAL ADDRESS:	1846 E Innovation Park Dr. STE 100, ORO VALLEY, AZ 85755
MAILING ADDRESS	1846 E Innovation Park Dr. STE 100, ORO VALLEY, AZ 85755

PRINCIPAL ADDRESS

Att: Rider Concepts, LLC, 1846 E Innovation Park Dr, ORO VALLEY, AZ 85755

PRINCIPAL OFFICE OR STATUTORY AGENT ADDRESS IN JURISDICTION

DOES THE LAW OF YOUR JURISDICTION OF FORMATION REQUIRE YOU TO MAINTAIN AN OFFICE IN THAT JURISDICTION?	NO
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PRINCIPAL OFFICE ADDRESS:	N/A
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STATUTORY AGENT INFORMATION:
STATUTORY AGENT NAME:

PHYSICAL ADDRESS:

MAILING ADDRESS

United States Corporation Agents,
Inc.
Attn: Cheyenne Moseley, 1623
Central Ave Ste 18, CHEYENNE,
WY 82001
Attn: Cheyenne Moseley, 100 W.
Broadway Suite 100, GLENDALE,
CA 91210

PRINCIPAL INFORMATION

Member: Douglas Neil - 1846 E Innovation Park Dr, ORO VALLEY, AZ, 85755, USA - - Date of Taking Office:

SIGNATURE

Member: Douglas Neil - 08/18/2020



Secretary of State

Cheyenne, WY 82002-0020
Ph. 307-777-7311

ry of State

FILED: Aug 4 2020 9:03AM

Original ID: 2020-000934565

Limited Liability Company Articles of Organization

- I. The name of the limited liability company is:**
Rider Concepts LLC
- II. The name and physical address of the registered agent of the limited liability company is:**
United States Corporation Agents, Inc.
1623 Central Ave Ste 18
Cheyenne, WY 82001
- III. The mailing address of the limited liability company is:**
24 E Vera Ln.
Tempe, AZ 85284
- IV. The principal office address of the limited liability company is:**
24 E Vera Ln.
Tempe, AZ 85284
- V. The organizer of the limited liability company is:**
Legalzoom.com, Inc.
101 N Brand Blvd., 11th Floor, Glendale CA 91203

Signature: ***Cheyenne Moseley***

Date: **08/04/2020**

Print Name: **Cheyenne Moseley**

Title: **Asst. Secretary**

Email: **onlinefilings@legalzoom.com**

Daytime Phone #: **(323) 962-8600**

- ☒ I am the person whose signature appears on the filing; that I am authorized to file these documents on behalf of the business entity to which they pertain; and that the information I am submitting is true and correct to the best of my knowledge.
- ☒ I am filing in accordance with the provisions of the Wyoming Limited Liability Company Act, (W.S. 17-29-101 through 17-29-1105) and Registered Offices and Agents Act (W.S. 17-28-101 through 17-28-111).
- ☒ I understand that the information submitted electronically by me will be used to generate Articles of Organization that will be filed with the Wyoming Secretary of State.
- ☒ I intend and agree that the electronic submission of the information set forth herein constitutes my signature for this filing.
- ☒ I have conducted the appropriate name searches to ensure compliance with W.S. 17-16-401.

Notice Regarding False Filings: Filing a false document could result in criminal penalty and prosecution pursuant to W.S. 6-5-308.

W.S. 6-5-308. Penalty for filing false document.

(a) A person commits a felony punishable by imprisonment for not more than two (2) years, a fine of not more than two thousand dollars (\$2,000.00), or both, if he files with the secretary of state and willfully or knowingly:

(i) Falsifies, conceals or covers up by any trick, scheme or device a material fact;

(ii) Makes any materially false, fictitious or fraudulent statement or representation; or

(iii) Makes or uses any false writing or document knowing the same to contain any materially false, fictitious or fraudulent statement or entry.

- ☒ I acknowledge having read W.S. 6-5-308.

Filer is: ☐ An Individual ☒ An Organization

The Wyoming Secretary of State requires a natural person to sign on behalf of a business entity acting as an incorporator, organizer, or partner. The following individual is signing on behalf of all Organizers, Incorporators, or Partners.

Filer Information:

By submitting this form I agree and accept this electronic filing as legal submission of my Articles of Organization.

Signature: *Cheyenne Moseley*

Date: 08/04/2020

Print Name: Cheyenne Moseley

Title: Asst. Secretary

Email: onlinefilings@legalzoom.com

Daytime Phone #: (323) 962-8600

Consent to Appointment by Registered Agent

United States Corporation Agents, Inc., whose registered office is located at **1623 Central Ave Ste 18, Cheyenne, WY 82001**, voluntarily consented to serve as the registered agent for **Rider Concepts LLC** and has certified they are in compliance with the requirements of W.S. 17-28-101 through W.S. 17-28-111.

I have obtained a signed and dated statement by the registered agent in which they voluntarily consent to appointment for this entity.

Signature:	<u><i>Cheyenne Moseley</i></u>	Date: 08/04/2020
Print Name:	Cheyenne Moseley	
Title:	Asst. Secretary	
Email:	onlinefilings@legalzoom.com	
Daytime Phone #:	(323) 962-8600	

STATE OF WYOMING
Office of the Secretary of State

I, EDWARD A. BUCHANAN, Secretary of State of the State of Wyoming, do hereby certify that the filing requirements for the issuance of this certificate have been fulfilled.

CERTIFICATE OF ORGANIZATION

Rider Concepts LLC

I have affixed hereto the Great Seal of the State of Wyoming and duly executed this official certificate at Cheyenne, Wyoming on this **4th** day of **August, 2020** at **9:03 AM**.

Remainder intentionally left blank.



Filed Date: 08/04/2020

Edward A. Buchanan

Secretary of State

Filed Online By:
Cheyenne Moseley
on 08/04/2020

STATE OF WYOMING
Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

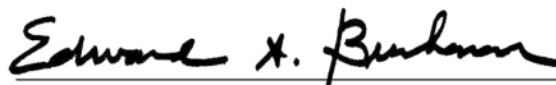
Rider Concepts LLC
is a
Limited Liability Company

formed or qualified under the laws of Wyoming did on **August 4, 2020**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2020-000934565**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 8th day of August, 2020 at 12:06 PM. This certificate is assigned ID Number 038373033.




Secretary of State

Clear Form

Print Form

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

STATUTORY AGENT ACCEPTANCE*Please read Instructions [M002i](#)*

1. **ENTITY NAME** – give the **exact** name in Arizona of the corporation or LLC that has appointed the Statutory Agent (this must match exactly the name as listed on the document appointing the statutory agent, e.g., Articles of Organization or Articles of Incorporation):

2. **STATUTORY AGENT NAME** – give the exact name of the Statutory Agent appointed by the entity listed in number 1 above (this will be *either* an individual or an entity). **NOTE** - the name must match **exactly** the statutory agent name as listed in the document that appoints the statutory agent (e.g. Articles of Incorporation or Articles of Organization), including any middle initial or suffix:

3. STATUTORY AGENT SIGNATURE:

By the signature appearing below, the individual or entity named in number 2 above accepts the appointment as statutory agent for the entity named in number 1 above, and acknowledges that the appointment is effective until the appointing entity replaces the statutory agent or the statutory agent resigns, whichever occurs first.

The person signing below declares and certifies *under penalty of perjury* that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law.



Signature

Printed Name

Date

REQUIRED – check only one:

- | | |
|--|---|
| <input type="checkbox"/> Individual as statutory agent: I am signing on behalf of myself as the individual (natural person) named as statutory agent. | <input type="checkbox"/> Entity as statutory agent: I am signing on behalf of the entity named as statutory agent, and I am authorized to act for that entity. |
|--|---|

Expedited or Same Day/Next Day services are available for an additional fee – see Instructions or Cover sheet for prices.

Filing Fee: none (regular processing)
All fees are nonrefundable - see Instructions.

Mail: Arizona Corporation Commission - Examination Section
1300 W. Washington St., Phoenix, Arizona 85007
Fax: 602-542-4100

Please be advised that A.C.C. forms reflect only the **minimum** provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.

All documents filed with the Arizona Corporation Commission are **public record** and are open for public inspection.

If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.