CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY

(Instructions on back of application)

2011 AUG 15 PM 1: 15

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

    Cash Savers LLC

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

    687 N Five Mile boise id. 83713
    _____
    (Street Address)

    _____
    (Mailing Address, if different than street address)

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

    Andrew Horejs   12363 w billabong st. boise id 83709
    _____   _____
    (Name)   (Street Address)

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

Name	Address
Andrew Horejs	12363 w billabong st. boise id 83709
Garth Newkirk	3652 W Taft Boise Id 83703
Andrew Ott	12363 w Billabong st. boise id 83709

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

    687 N Five Mile rd Boise Id 83713

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Andrew Horejs

Signature _____

Typed Name: Garth Newkirk

Secretary of State use only

cert_org_llc Rev. 07/2010

W 105886