



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 MAR -4 PM 1:51

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

S5, LLC

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

10650 N Sage Hollow Way, Boise, ID 83714

(Street Address)

10650 N Sage Hollow Way

(Mailing Address, if different than street address)

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

Shaileen Savage

(Name)

10650 N Sage Hollow Way

(Street Address)

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

Name	Address
Shaileen Savage	10650 N Sage Hollow Way, Boise, ID 83714
Anderson Savage	10650 N Sage Hollow Way, Boise, ID 83714
Donald Savage Junior	10650 N Sage Hollow Way, Boise, ID 83714

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

10650 N Sage Hollow Way, Boise, ID 83714

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Shaileen Savage

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
03/04/2013 05:00
CK: 2007 CT: 200121 BH: 1362764
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