

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 JAN 24 PM 1: 05

SECRETARY DE STATE

·	STATE OF IDAHO
1. The name of the limited liability co	mpany is:
LX Rewards LLC	
2. The complete street and mailing ac 900 E. Columbary Court, Eagle, ID 8361	ddresses of the initial designated office:
(Street Address) PO Box 2678, Eagle, ID 83616	
(Mailing Address, if different than street address)	trace of the registered agent:
3. The name and complete street add	riess of the registered agent.
Tim Reid	250 Beacon Light Rd, eagle, ID 83616
(Name)	(Street Address)
The name and address of at least of company:	one member or manager of the limited liability
<u>Name</u>	<u>Address</u>
Sawtooth Sports, Inc.	900 E. Columbary Court, Eagle, ID 83616
 Mailing address for future correspondence PO Box 2678, Eagle, ID 83616 	ondence (annual report notices):
6. Future effective date of filing (option	onal):
ignature of a manager, member o	or authorized
Mos Va	Secretary of State use only
yped Name: Philip Gorman for Sawtooth	Sports, Inc. N 133569
ianatura	IDAHO SECRETARY OF STATE 01/24/2014 05:00
ignature vped Name:	CK: 1681315 CT: 172999 BH: 148754
voeg name.	* # *AA4 AA ****************************

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