



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

10 DEC 20 11 M 9:16

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

S.2S LLC

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

478 N 3500 E

(Street Address)

Lewisville, ID 83431

(Mailing Address, if different than street address)

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

David P. Smith

(Name)

478 N 3500 E Lewisville, ID 83431

(Street Address)

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

Name

Address

David P. Smith 478 N 3500 E Lewisville, ID 83431

Becky A. Smith 478 N 3500 E Lewisville, ID 83431

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

478 N 3500 E Lewisville, ID 83431

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Becky A Smith

Typed Name: Becky A Smith

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
12/20/2010 05:00  
CK: 1019 C: 253636 BH: 1251595  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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