

(Name)

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in <u>duplicate</u>. 2017 JUL 24 AM 8: 14

## SECRETARY OF STATE STATE OF IDAHO

1. The name of the limited liability company is: SS5, L.L.C.

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is: POBOX 3476 IDAHO FALLS IDAHO 83403

(	(Street Address) 772 E Kinswood St Idaho FAlls ID 83404 (Mailing Address, if different)				
3.	The name of the registered agent and street address of the registered agent:				
	LAUNIE SHELMAN	772 EAST KINSWOOD STREET IDAHO FALLS IDAHO 83404			

(Address cannot be a post office box or postal mail box)

4. The name and address of at least one governor of the limited liability company:

	LAUNIE SHELMAN	772 EAST KINSWOOD STREET IDAHO FALLS IDAHO 83404				
	(Name)	(Address)				
	(Neme)	(Address)	·			
	(Name)	(Address)				
	(Name)	(Address)				
5.	-	iling address for future correspondence (annual report notices): BOX 3476 IDAHO FALLS IDAHO 83403 Address)				
	nature of organizer(s).	2	Secretary of State use only			
Prir	nted Name: LAUNIE SHELMAN	l	IDAHO SECRETARY OF STATE 07/24/2017 05:00 CK:11233645 CT:172099 BH:1594774			
Signature:			1@ 100.00 = 100.00 ORGAN LLC #2 1@ 20.00 = 20.00 EXPEDITE C #3			
Prir	nted Name:					
Rev. 1	1/2015		W186162			