

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2012 MAY 29 AM 9: 37

(Instructions on back of application)

	(matractions of bac	k or application	,	SECRETARY OF STATE
1. The name of the limited liability co		mpany is:		STATE OF IDAHO
		SEG, LLC		
	street and mailing ac I, Kimberly, ID 83341	ddresses of the	initial designated	office:
(Mailing Address,	if different than street address)	<u> </u>		
3. The name an	d complete street add	lress of the regi	stered agent:	
Sigfredo Gomez (Name)		3485 E 3838 N, Kimberly, ID 83341 (Street Address)		
. The name and company:	d address of at least o	one member or	manager of the li	imited liability
Sigfredo Gome	_		E 3838 N, Kimberly, ID 83341	
Esperanza Go		3485 E 3838 N, Kimberly, ID 83341		
	ss for future correspor , Kimberly, ID 83341	ndence (annual	report notices):	
. Future effectiv	e date of filing (option	nal):		
gnature of a merson.	nanager, member or	authorized		
Α	11.		Secretary	of State use only
gnature Timus		-		
ped Name: Sign	redo Gomez			
gnature			IDAHO SECRETARY OF STATE 95/29/2012 95:00 CK: 9869 CT: 142512 BH: 132590 1 # 180.00 = 180.00 ORGON LICE	
yped Name:				

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