



## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

	ompany is: SEUT OF IDAHU
1. The name of the limited liability co	empany is: SIATE
The	ee Flips Securities, L.C.
The complete street and mailing ac 416 East Oneida Preston ID 83263	ddresses of the initial designated/principal office:
(Street Address) PO Box 104 Preston ID 83263 (Mailing Address, if different than street address)	
The name and complete street address;	dress of the registered agent:
Virginia Flippence	416 East Oneida Preston ID 83263
(Name)	(Street Address)
company:	one member or manager of the limited liability
<u>Name</u>	<u>Address</u>
Scott Flippence	140 E 500 N Mendon UT 84325
Jessica Flippence	140 E 500 N Mendon UT 84325
Virginia Flippence	416 East Oneida Preston ID 83263
5. Mailing address for future correspondence PO Box 104 Preston ID 83263	ondence (annual report notices):
6. Future effective date of filing (option	nal):
Signature of a manager, member o person.	r authorized
porcori.	Secretary of State use only
Signature	
Typed Name: Scott Flippence	

Signature // Jessica Flippence

IDAHO SECRETARY OF STATE 10/13/2010 05:00 CK: 177 CT: 251955 BH: 1242785 1 @ 100.00 = 100.00 ORGAN LLC # 2