

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application) 2012 JAN 10 AH II: 27

1.	The name of the limited liability company is:		SEUNETARY US GUATÉ STATE OF IDAHO
	Darren Ov	Owen Trucking LLC	
2.	The complete street and mailing addresses of the initial designated/principal office: 80 N 760 W, Blackfoot, ID 83221		
	(Street Address)		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Darren Owen	80 N 760 W, Blackfoot, ID 83221	
	(Name) (St	reet Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>	Address 80 N 760 W, Blackfoot, ID 83221	
	Darren Owen		
			
5. Mailing address for future correspondence (annual report notices):			
	80 N 760 W,	Blackfoot, ID 832	21
6.	Future effective date of filing (optional):		
Sig	nature of organizer(s). (An organizer is a men	nber, or is	
acti	ing in behalf of a member or members).		Secretary of State use only
Sia	nature //	K.PM.	
_	ped Name: Anna Manukyan		
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