

State of Idaho

Office of the Secretary of State

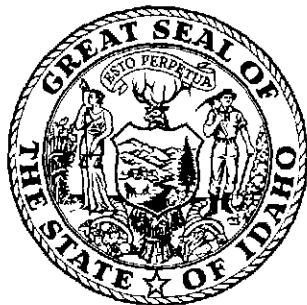
**CERTIFICATE OF REGISTRATION
OF
SCE, INC.**

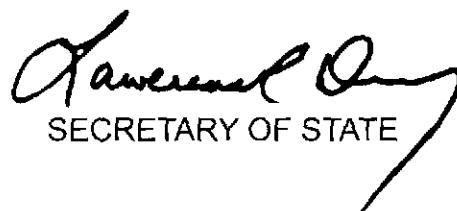
File Number C 217201

I, LAWERENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: April 2, 2018




Lawrence Denney
SECRETARY OF STATE

By 



FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the form in duplicate.

2018 APR -2 AM 9:27

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the entity is: SCE, INC.

2. The name which it shall use in Idaho is: _____

(Enter a name here, only if you are required to adopt an alternate name)

3. Select the type of entity you wish to register:

<input checked="" type="checkbox"/> Business Corporation	<input type="checkbox"/> General Partnership
<input type="checkbox"/> Nonprofit Corporation	<input type="checkbox"/> General Cooperative Association
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Partnership (Including a limited liability limited partnership)
<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Statutory Trust, Business Trust, or Common-law Business Trust

Other:

(Use "Other" only if your foreign entity type is not listed above, and enter the type here.)

4. Jurisdiction of formation: MISSOURI

(Provide the domestic jurisdiction where the entity was formed)

5. The address of its principal office is:

215 ST MARYS ROAD, VILLA RIDGE, MO 63089

(Street Address)

(Mailing Address, if different)

6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

(Street Address)

(Mailing Address, if different)

7. The mailing address to which correspondence should be addressed, if different from item 5, is:

(Address)

8. Name and street address of registered agent in Idaho:

REGISTERED AGENTS INC. 784 S. CLEARWATER LOOP STE R, POST FALLS ID 83854

(Name)

(Address)

9. The name, capacity, and mailing address of at least one governor:

LARRY PROEMSEY PRESIDENT 101 SKYVIEW LN, LABADIE, MO 63055

(Name)

(Capacity)

(Address)

(Name)

(Capacity)

(Address)

Typed Name: LARRY PROEMSEY

Signature:

Capacity: PRESIDENT

Secretary of State use only

IDAHO SECRETARY OF STATE

04/02/2018 05:00

CK:27601 CT:355494 BH:1635651
1@ 100.00 = 100.00 FOR REG ST #2
1@ 20.00 = 20.00 EXPEDITE C #3

C 217201

STATE OF MISSOURI



John R. Ashcroft
Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

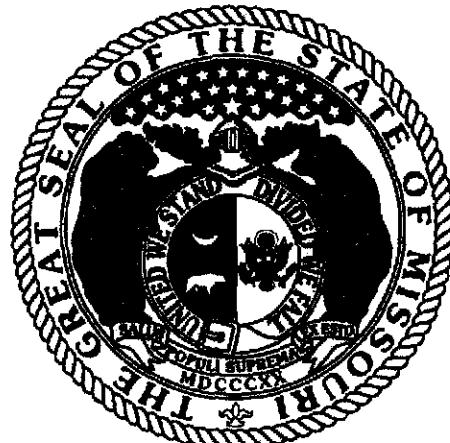
SCE, Inc.
00383252

was created under the laws of this State on the 12th day of July, 1993, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 25th day of January, 2018.

A handwritten signature of John R. Ashcroft in black ink.

Secretary of State



Certification Number: CERT-01252018-0055