FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 NOV 28 AM 11: 34

(mondenous of	r back or application)	SECRETARY OF STATE	
1. The name of the limited liabil	ity company is:	STATE OF IDAHO	
	Se-Pac, LLC		
 The complete street and mailing 710 Washington Street North #3, (Street Address) 	ng addresses of the initial Twin Falls, ID 83301	designated/principal office:	
(Mailing Address, if different than street ad	dress)		
The name and complete stree	t address of the registered	l agent:	
David Sebring (Name)	710 Washington Stree (Street Address)	t North #3, Twin Falls, ID 83301	
 The name and address of at le company: 	east one member or mana	ger of the limited liability	
<u>Name</u>	Address		
David Sebring	710 Washington Street North #3, Twin Falls, ID 83301		
Ryan Packham	710 Washington Stree	710 Washington Street North #3, Twin Falls, ID 83301	
5. Mailing address for future corre	espondence (annual repor	t notices):	
710 Washington Street North #3, T	win Falls, ID 83301	1104000).	
6. Future effective date of filing (d	optional):		
ignature of a manager, membe erson.	er or authorized		
ignature Laurel Sel	(Secretary of State use only	
yped Name: David Sebring	- Cong		
ignature 1			
/ped Name: Ryan Packham		IDAHO SECRETARY OF STATE	
		11/28/2012 05:0	

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IDAHO SECRETARY OF STATE

11/28/2012 05:00

CK: 1207514 CT: 172099 BH: 1349092
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