

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 11 80V 18 AM 9: 11

FILED EFFECTIVE

(Instructions on back of application)

и	(HISHUCTIONS ON DACK	or application	,
1.	The name of the limited liability con	npany is:	SEGACI 1237 GE STA TE STATE OF IDAHO
		The Nook LLC	
2.	The complete street and mailing add	dresses of the	e initial designated office:
	(Street Address) Idaho Falls, ID 83401 (Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	MaryAnne P Lyman	1525 Lincoln	Road, Idaho Falls, ID 83401
	(Name)	(Street Address)
·7.	The name and address of at least o company: Name MaryAnne P Lyman		Address Road, Idaho Falls, ID 83401
	MaryAnne P Lyman	1929 LHICOHI	Road, Idaho Falis, ID 05401
			
5 .	Mailing address for future correspondence (annual report notices):		
	1525 Lincoln Road, Idaho Falls, ID 83401		
6.	Future effective date of filing (option	nal):	
_	nature of a manager, member or son.	authorized	
•			Secretary of State use only
	nature Manthue Syman.)	
ſyŗ	ped Name: MarlyAnne P Lyman		
Signature			IDAHO SECRETARY OF STATE 11/18/2011 05:00
Typed Name:			CK: 18941184134 CT: 264261 BH: 1298 1 @ 100.88 = 180.88 ORGAN LLC N 2
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