

**FILED**

# **CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY**

(Instructions on back of application)

2011 DEC 21 PM 3:10

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

SCI Insurance, LLC

2. The complete street and mailing addresses of the initial designated office:

3354 N. Tylerson Ave. Boise, ID 83713

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Joseph S. Piccione

(Name)

3354 N. Tylerson Ave. Boise, ID 83713

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

**Name****Address**

Joseph S. Piccione

3354 N. Tylerson Ave. Boise, ID 83713

Joan I. Piccione

3354 N. Tylerson Ave. Boise, ID 83713

5. Mailing address for future correspondence (annual report notices):

3354 N. Tylerson Ave. Boise, ID 83713

6. Future effective date of filing (optional): 1/01/2012

Signature of a manager, member or authorized person.

Signature

Typed Name: Joseph S. Piccione

Signature

Typed Name:

Secretary of State use only

 IDAHO SECRETARY OF STATE  
 12/21/2011 05:00  
 CK: 142 CT: 265198 BH: 1302705  
 1 @ 100.00 = 100.00 ORGAN LLC # 2

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