

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2016 SEP -8 PM 12: 55

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

SECRETARY OF STATE STATE OF IDAHO

Complete and submit the application in duplicate.

Complete and Submit	the application in <u>duplicat</u>	<u>e</u> .	
The name of the limited liabilit	y company is:		
COUSINS INN LLC			
(Remember to include the wo	rds "Limited Liability Company,"	"Limited Company," or the abbreviations L.L.C., LLC, or LC)	
The complete street and maili 5605 PLYMOUTH BOISE ID	•	ncipal office is:	
(Street Address) 6103 FAIRVIEW AVE BOISE	ID 83704		
(Mailing Address, if different)			
The name of the registered ag	gent and street address	of the registered agent:	
MAURICE K STARK	2016 N PHILLI	2016 N PHILLIPPI BOISE ID 83706	
(Name)	(Address cannot be a	(Address cannot be a post office box or postal mail box)	
The name and address of at le	•	e limited liability company:	
MTN W. IRA FBO MAURICE	(Address)		
•	. ,		
STARK & KAREN M STARK		2016 N PHILLIPPI BOISE ID 83706	
(Name)	(Address)		
(Name)	(Address)		
(Name)	(Address)	(Address)	
Mailing address for future cor 6103 FAIRVIEW AVE BOISE	*	eport notices):	
(Address)			
gnature of organizer(s).		Constant of Clate and only	
gnature: M.k. Std.		Secretary of State use only	
inted Name: MAURICE K STARI	Κ	IDAHO SECRETARY OF STATE 09/08/2016 05:00	
		CK:4189502 CT:172099 BH:1545391 10 100.00 = 100.00 ORGAN LLC #2	
gnature:		1	

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Rev. 11/2015

Printed Name: ____