



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 JUL 21 PM 2:10

1. The name of the limited liability company is:

Voyagers Hospitality, LLC

SECRETARY OF STATE
STATE OF IDAHO

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

621 E Sherman Ave, Coeur d'Alene, ID 83814

(Street Address)

P.O. Box 201, Coeur d'Alene, ID 83816

(Mailing Address, if different than street address)

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

Phil Provost

(Name)

621 E Sherman Ave, Coeur d'Alene, ID 83814

(Street Address)

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

Name

Address

Phil Provost

621 E Sherman Ave, Coeur d'Alene, ID 83814

Bretha Provost

621 E Sherman Ave, Coeur d'Alene, ID 83814

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

P.O. Box 201, Coeur d'Alene, ID 83816

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name:

Phil Provost

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

07/21/2014 05:00

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