



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typed).

For Office Use Only

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1. The name of the limited liability company is:

RR RELAXATION RETREAT LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

3894 BROOKIE DR POST FALLS ID 83854

(Street Address)

(Mailing Address, if different)

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

RAY ROUTH

(Name)

3894 BROOKIE DR POST FALLS ID 83854

(Address)

4. The name and address of at least one governor of the limited liability company:

RAY ROUTH

(Name)

3894 BROOKIE DRIVE POST FALLS ID 83854

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

3894 BROOKIE DRIVE POST FALLS ID 83854

(Mailing Address)

Signature of organizer(s).

Printed Name: **RAY ROUTH**

Signature: 

Printed Name: _____

Signature: _____

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