



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2009 FEB -3 PM 1:51

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

HOSPITALITY ENTERPRISES LLC

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

3706 E.GREENMEADOWS PL. NAMPA,ID.83687

(Street Address)

(Mailing Address, if different than street address)

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

JOHN LARSON

(Name)

3706 E.GREENMEADOWS PL.,NAMPA,ID.83687

(Street Address)

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

Name

JOHN LARSON

Address

Same as above

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

Same as above

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

John Larson

Typed Name:

JOHN LARSON

Signature

Typed Name:

Secretary of State use only

W81139

IDAHO SECRETARY OF STATE
02/03/2009 05:00
CK: 1200 CT: 221142 SH: 1155310
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