





## STATE OF IDAHO

## Office of the secretary of state, Lawerence Denney CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00

For Office Use Only

-FILED-

File #: 0004094709

Date Filed: 12/8/2020 12:21:53 PM

Select one: Standard, Expedited or Same descriptions below)	Day Service (see	Standard (filing fee \$100)
1. Limited Liability Company Name	<del>* , , , , , , , , , , , , , , , , , , ,</del>	
Type of Limited Liability Company		Limited Liability Company
Entity name		Five Star Rental LLC.
2. The complete street address of the principal office is	<b>3</b> :	
Principal Office Address		52 HIDDEN SPRINGS CIRCLE GRANGEVILLE, ID 83530
3. The mailing address of the principal office is:		
Mailing Address		PO BOX 590 GRANGEVILLE, ID 83530-0590
4. Registered Agent Name and Address		
Registered Agent		Registered Agent Christine Dewey Physical Address: 52 HIDDEN SPRINGS CIRCLE GRANGEVILLE, ID 83530 Mailing Address: PO BOX 590
	ninted has consented to	GRANGEVILLE, ID 83530-0590  conserve as registered agent for this entity.
I affirm that the registered agent appo	vinted has consented to	·
5. Governors	PO BOX 590	o serve as registered agent for this entity.  Address
5. Governors Name	PO BOX 590 GRANGEVIL PO BOX 590	Address  LE, ID 83530
5. Governors  Name  Christine Dewey	PO BOX 590 GRANGEVIL PO BOX 590 GRANGEVIL	Address  LE, ID 83530

Print & Mail Enclosures

I understand the document can ONLY be filed if the following items are included:

Payment in the amount of \$100.00 (if expedited, \$140; if 24 hours processing, \$200) - checks payable to the Secretary of State, signed and recently dated.

This filing form (submit within 30 days) with the required signature(s).

If you are submitting a correction, return the correction letter with your updated document.

