



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2004 MAR -5 AM 9:14
SECRETARY OF STATE
STATE OF IDAHO

NOTE: See instructions on reverse before filing.
MAY 2004
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Alpine Cottage Motel

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Jackie Lee

Complete Address

519 N. Main St., Cascade, Id. 83611

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

Alpine Cottage Motel

Jackie Lee

P.O. Box 942

Cascade, Id. 83611

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of
Assumed Business
Name and \$20.00 fee

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

Signature: Jackie Lee

Printed Name: Jackie Lee

Capacity/Title: Owner

(see instruction # 8 on back of form)

03/23/2004 05:00
CK: 1973 CT: 158010 BH: 734825
1 @ 25.00 = 25.00 ASSUM NAME # 2

IDANO SECRETARY OF STATE
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