



CERTIFICATE OF ASSUMED BUSINESS NAME FILED EFFECTIVE

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

2004 AUG 11 A 9:01

Please type or print legibly.

NOTE: See instructions on reverse before filing.

CLERK OF STATE
STATE OF IDAHO

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

GuestHouse Inn & Suites Idaho Falls

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

Name

Complete Address

Rocky Mountain Hospitality LLC
W 8664

38431 S. Hwy 97
Harrison ID 83833

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input 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:

GuestHouse Inn - Idaho Falls
38431 S. Hwy 97
Harrison ID 83833

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

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

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

Same

Phone number (optional):

(208) 684-3792

Signature:

Steve Rice
(signature required)

Printed Name:

Steve Rice

Capacity/Title:

member - LLC

(see instruction # 8 on back of form)

Secretary of State use only

g:\corpforms\abn form\stbn.p65 Revised 04/2003

IDAHO SECRETARY OF STATE
08/11/2004 05:00
CK: 2330 CT: 181387 DH: 768284
1 @ 25.00 = 25.00 ASSUM NAME # 4

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