



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on back of form.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

SANDPOINT WATERFRONT RETREAT

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

Name	Complete Address
<u>ALBERT SANDERS</u>	<u>17113 N. WRANGLER RD.</u>
<u>MARTINA SANDERS</u>	<u>RATHDRUM, ID. 83858</u>

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

(mark only those that apply)

☒ LODGING

☐ Retail Trade

☐ Manufacturing

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Finance, Insurance, and Real Estate

☒ Services

☐ Construction

☐ Mining

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

Phone number (optional): _____

SAME AS # 2

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

SAME AS # 4

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

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

Secretary of State use only

Signature: Martina Sanders

Printed Name: MARTINA SANDERS

Capacity: owner/pres./MGR.

(see instruction # 8 on back of form)

Revision 12/99
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IDAHO SECRETARY OF STATE
07/13/2001 05:00
CK: 2010 CT: 146782 BH: 487718
1 @ 20.00 = 20.00 ASSUM NAME # 2

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