

227

**FILED EFFECTIVE**

# **CERTIFICATE OF ASSUMED BUSINESS NAME**

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2016 NOV -2 PM 3:13

SECRETARY OF STATE  
STATE OF IDAHO

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

Wood River Inn & Suites

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Wood River Inn, LLC 603 N. Main Street, Hailey, ID 83333

(Name) (W141896) (Address)

(Name) (Address)

(Name) (Address)

(Name) (Address)

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

☐ Retail Trade

☐ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☒ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Wood River Inn, LLC

(Name)

P.O. Box 7120

(Address)

Ketchum, ID 83340

(City)

(State)

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Ryan Allison

Signature:

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Rev. 05/2015

Secretary of State use only

IDAHO SECRETARY OF STATE

11/02/2016 05:00

CK:4328718 CT:172099 BH:1553598

1@ 25.00 = 25.00 ASSUM NAME #2

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