



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2018 JAN -4 AM 8:47

SECRETARY OF STATE
STATE OF IDAHO

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

NORDMAN RESORT

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):

BENJAMIN T. VOTAVA P.O. BOX 414, NORDMAN, ID 83856

(Name)

(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:

NORDMAN RESORT

(Name)

P.O. BOX 414

(Address)

NORDMAN, ID 83848

(City)

(State)

(Zip code)

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

(Name)

(Address)

(City)

(State)

(Zip code)

Printed Name: BENJAMIN T. VOTAVA

Signature: *Benjamin T. Votava*

Printed Name: Ben Votava

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

01/04/2018 05:00

CK:17901 CT:263481 BH:1619390
1@ 25.00 = 25.00 ASSUM NAME #2

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