

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)



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:

The Old Heartland INN

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>William Kyle Hill</u>	<u>PO Box 0</u>
<u>Dora Ruth Hill</u>	<u>Council ID 83612</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

☐ 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:

PO BOX 0
COUNCIL ID 83612

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

Key Bank
PO BOX 1067
McCall ID 83638

Signature: William K. Hill

Printed Name: William K. Hill

Capacity: OWNER

(see instruction # 8 on back of form)

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

IDAHO SECRETARY OF STATE

07/16/1997 09:00
CR: NO CR # CT: 84314 DM: 21678

1 @ 20.00 = 20.00 ASSUM NAME

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