

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly. NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

08 SEP -4 AM 8: 20

SECRETARY OF STATE STATE OF IDAHO

Holiday Inn Express Hotel & Suites	
The true name(s) and business address(es) business under the assumed business name Name Om Shiv Krupa, L.L.C.	
The general type of business transacted und	der the assumed business name is: and Public Utilities
Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate ✓ The name and address to which future correspondence should be addressed: <a 238="" 83616<="" a="" eagle,="" href="Maintenance: Kanti I. Patel" id="" river="" trail"="" w.=""> 5. Name and address for this acknowledgme copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
- Copy to (in other diality in doors).	Secretary of State use only
nature:	IDAHO SECRETARY OF STATI Seven of Columbia Secretary of Stati G9/04/2008 05 = CK: NONE CT: 2630 BH: 113 1 @ 25.00 = 25.00 ASSUM N