



CERTIFICATE OF ASSUMED BUSINESS NAME

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

--2015 JUL 16 AM 8:33

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.
Instructions are included on back of application.

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

Bigwood Golf Course

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

<u>Name</u>	<u>Complete Address</u>
<u>Bigwood Sports LLC</u>	<u>P.O. Box 87 Sun Valley</u>
<u>W 151684</u>	<u>IDAHO 83353</u>

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

KRISTIN K. STEWART
P.O. Box 87
SUN VALLEY, IDAHO 83353

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

Brian J. Bausolt,
P.O. Box 370
KETCHUM, IDAHO 83240

Signature: Kristin W Stewart

Printed Name: Kristin W Stewart

Capacity/Title: member

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
07/16/2015 05:00
CK:7704 CT:21422 BH:1484211
1@ 25.00 = 25.00 ASSUM NAME #2

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