227



Printed Name: Barbara J. Hamlett-Soper

Capacity/Title: _Member

CERTIFICATE OF ASSUMED BUSINESS NAME

2012 AUG 28 PH 12: 36

SECRETARY OF STATE STATE OF IDAMO

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

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: Sacajawea Inn 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Hamlett Enterprises LLC 705 S. Challis St. - Salmon, ID 83467 The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 450 North 4th Street PO Box 83720 Hamlett Enterprises Boise ID 83720-0080 705 S. Challis St. 208 334-2301 Salmon, ID 83467 5. Name and address for this acknowledgment CODY IS (if other than # 4 above)." Secretary of State use only Signature:_ Printed Name: Walter J. Sope Capacity/Title: Member Signature: プ

IDAHO SECRETARY OF STATE

08/28/2012 05:00

CK: CASH CT: 132428 BH: 1337784

1 0 25.00 = 25.00 ASSUM NAME # 2