CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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 fili	ng. STATE
The assumed business name which the undersign business is:	
RYAN'S RIDES	
The true name(s) and <u>business</u> address(es) of the business under the assumed business name:	ne entity or individual(s) doing
Name 1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Complete Address
(W-10989)	ALES LLC
	717 CALDWELL BLUD VAMPA IDAHO 1365
The general type of business transacted under th	
Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208-442-1304
	Secretary of State use only

Signature:

Printed Name: 3 LC

Capacity/Title:

(see instruction #8 on back of form)

IDAHO SECRETARY OF STATE
97/20/2004 05:00
CK: 7812 CT: 158818 BH: 756441
1 8 25.88 25.88 ASSUM NAME # 2