

CERTIFICATE OF ASSUMED BUSINESS NAME

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

07 AUG -9 AM 8: 41 SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

GEM VALLEY PERFORMING ARTS COMMITTEE	
The true name(s) and business address(business under the assumed business na	es) of the entity or individual(s) doing ame: Complete Address P.O. BOX 28 GRACE, ID 83241
CHERI PECK	2070 NITER BENCH RD GRACE, ID 83241
3. The general type of business transacted at Retail Trade Transportation Wholesale Trade Construction Services Agriculture	on and Public Utilities n
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estat	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: KATHY TILLOTSON	Secretary of State 700 West Jefferson Basement West PO Box 83720
P.O. BOX 28	Boise ID 83720-0080
GRACE, ID 83241	208 334-2301
 Name and address for this acknowledgm copy is (if other than # 4 above): IRELAND BANK 	nent Phone number (optional):
P.O. BOX D	Secretary of State use only
GRACE, ID 83241	
nature: <u>Kathy Julotoon</u>	ETARYEDI STATE
nted Name: Kathy Tillotson	
IDAHO SECRI	ETARYEO STATE POR TOUR DESCRIPTION OF STATE