

CERTIFICATE OF ASSUMED BUSINESS NAME FOR FECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. MAR 20 9 45 /// 101

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

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1. The assumed business name which the undersigned use(s) in the transaction of business is:	
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name ANNIANVACATION COM INC. (C137/10)	of the entity or individual(a) dains
3. The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Soc RIVERIJEW Boise 10 83713	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above): Signature: Printed Name: PRESIDENT (see instruction # 9 on horse of feet)	Secretary of State use only
Capacity: PRESIDENT	D43736