Printed Name: ___

owner

(see instruction # 8 on back of form)

Capacity:

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned

gives notice of adoption of an As	•
1. The assumed business name which the unbusiness is: Castle Creek Hunting	73 G
Lastle Creek Hunting	7 (140 MA TO TO
 The true name(s) and business address(es business under the assumed business name 	ne is/are:
<u>Name</u>	Complete Address 57
Curt Clark	2135 Fair Meadow BoisE, JO 87704
 The general type of business transacted un (mark only those that apply) 	nder the assumed business name is:
Retail Trade Manufacturin	
☐ Wholesale Trade☐ Agriculture☐ Construction	Finance, Insurance, and Real EstaMining
A 35	Phone number (optional): 208: 377-8946
CASTLE CREEK HUNTING CLUB	Submit Certificate of
CURT CLARK 2135 FAIR MEADOW	Assumed Business
BOISE ID 83704	Name and \$20.00 fee to:
10010	Secretary of State
	700 West Jefferson
 Name and address for this acknowledgme 	
COPY is-(if other than # 4 above).	PO Box 83720 Boise ID 83720-0080
	208 334-2301
	Secretary of State use only
,	E IDAHO SECRETARY OF STATE
11 01/	IDAHO SECRETARY OF STATE 9 07/14/1999 09:00 CK: none CT: 114004 RH: 233442
ature:	CK: name CT: 118004 BH: 233642

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