

CERTIFICATE OF

D7 OCT 26 AT 8: 35 FFECTIVE

ASSUMED BUSINESS NAME

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

STATE OF IDAHO

AM 8: 35

NOTE: See instructions on reverse before filing.

	P Sports
The true name(s) and business address(e business under the assumed business name Name Scott Lively	es) of the entity or individual(s) doing me: Complete Address 351 Caldwell Blvd Nampa ID 83686
Leana Lively	
The general type of business transacted up	nder the assumed business are to
	n and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: Scott Lively	Secretary of State 700 West Jefferson Basement West PO Box 83720
351 Caldwell Blvd Nampa ID 83686	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent
	Secretary of State use only
nature: Sand Live	brimstann.p85
nted Name: Leana Lively	IDAHO SECRETARY OF STATE
pacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 10/26/2007 05:4 CK: 1845 CT: 218973 BH: 1888 1 25.88
(see instruction # o on Dack of form)	* £ 27:00 - 27:00 H33NU WH

D116283