## FILED EFFECTIVE



## CERTIFICATE OF ASSUMED BUSINESS NAME

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

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Please type or print legibly.

NOTE: See instructions on reverse before filing.

| business is:  MPC Comput  | iters Bowl   |
|---|--|
| 2. The true name(s) and business address(es) or business under the assumed business name:  Name  Humanitarian Bowl, Inc.  | of the entity or individual(s) doing : Complete Address 1109 Main St., Suite & Boise, ID 83702   |
| 3. The general type of business transacted unde   | er the assumed business name is:   |
| Wholesale Trade Construction  ✓ Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Gary Beck  1109 Main St., Suite B  Boise, ID 83702  5. Name and address for this acknowledgmen copy is (if other than # 4 above): | 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  Phone number (optional): |
| Stephen R. Drake  101 S. Capitol Blvd., Suite 1900  | Secretary of State use only  |
| Boise, ID 83702  Signature:   | IDAHO SECRETARY OF STATE  BA 31 / 2004 05 = 00  CK: 2752 CT: 158010 BH: 763723  1 9 25.06 = 25.00 ASSUM HANE #   |
| Capacity/Title: Executive Director (see instruction # 8 on back of form)  | CK: 2752 CT: 158010 BH: 763/23   |