

FILED EFFECTIVE

2001 FEB 17 AM 9:23

STATE OF IDAHO

227



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

CAMPUS TRYST.COM

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

NATHAN N. FULLMER 236 S. 2ND E. REXBURG, ID 83440
MYLE C. FULLMER 236 S. 2ND E. REXBURG, ID 83440
SHERI FULLMER 236 S. 2ND E. REXBURG, ID 83440

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

NATHAN N. FULLMER
236 S. 2ND E.
REXBURG, ID 83440

5. Name and address for this acknowledgment 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):

208-317-4002

Secretary of State use only

Signature: [Signature]

(signature required)

Printed Name:

NATHAN N. FULLMER

Capacity/Title:

PRESIDENT

(see instruction # 8 on back of form)

073183

IDAHO SECRETARY OF STATE
 02/17/2004 05:00
 CK: 3526 CT: 176686 BH: 727783
 1 @ 25.00 = 25.00 ASSUM NAME # 2