

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO

FILED

Pursuant to Section 53-504, Idaho Code, the undersigned

97 DEC - 1 PM 3:45

gives notice of adoption of an Assumed Business Name.

SECRETARY OF STATE

STATE OF IDAHO

1. The assumed business name which the undersigned uses in connection of business is:

Trips AHoy Travel

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

Name	Complete Address
<u>Charlotte E. Alexander</u>	<u>HC79 Box 725 Melba Id 83641</u>
<u>Sharon E. Cunningham</u>	<u>HC79 Box 100 Melba Id 83641</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

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

Phone number (optional): _____

122 Trips AHoy Travel
122 Cleveland Blvd
Caldwell, Id 83605

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Sharon E. Cunningham
HC79 Box 100
Melba, Id 83641

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

Secretary of State use only

Signature: Sharon Cunningham

Printed Name: Sharon Cunningham

Capacity: General Partner
(see instruction # 8 on back of form)

Revision 2/97
c:\corp\forms\sign.pms

IDAHO SECRETARY OF STATE

12/02/1997 09:00
CK: CASH CT: 90566 BH: 60020

1 @ 20.00 = 20.00 ASSUM NAME

D 10185