



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on back of form.)

FILED/EFFECTIVE
JUL 25 AM 8:54

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

SECRETARY OF STATE
STATE OF IDAHO

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

SOUTH 93 RV PARK

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

MIKE SHETLER

2404 JORDEN LANE

ANDREA SHETLER

FILER, IDAHO 83328

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

- | | | |
|--|--|--|
| <input checked="" 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): (208) 326-5092

2501 TWIN VIEW LN.

TWIN FALLS IDAHO 83301

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

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: _____

Printed Name: _____

Capacity: _____

OWNER

(see instruction # 8 on back of form)

Revision 12/89

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IDAHO SECRETARY OF STATE
07/26/2001 05:00
CK: 2783 CT: 149291 BH: 409955
1 @ 20.00 = 20.00 ASSUM NAME # 2

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