CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, to submits for filing a certificate of Assumed E Please type or print legibly. NOTE: See instructions on reverse befor	S NAME FILED EFFECTIVE the undersigned O7 AUG 13 PM 12: 49 SECRETARY OF STATE
1. The assumed business name which the un business is: RAVEN'S ROOST	
 2. The true name(s) and business address(es business under the assumed business nam Name <u>RONALD H. YOUNGMAN</u> <u>CAROL YOUNGMAN</u> <u>CAROL YOUNGMAN</u> <u>CAROL YOUNGMAN</u> 3. The general type of business transacted un <u>Manufacturing</u> <u>Manufacturing</u> <u>Mining</u> <u>Finance, Insurance, and Real Estate</u> 4. The name and address to which future correspondence should be addressed: <u>RAVEN'S ROOST</u> <u>H79598 HWY. 95</u> <u>SANDPOINT, ID 83864</u> 	ne: Complete Address <u>479598 HWY 95, SANDPOINT, ID 83864</u> <u>479598 HWY 95, SANDPOINT, ID 83864</u> nder the assumed business name is: n and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
5. Name and address for this acknowledgm copy is (if other than #4 above): Signature: <u>Mul H dector</u> Printed Name: <u>RoNAD H VOLNGMAN</u> Capacity/Title: <u>OWNER</u> (see instruction #8 on back of form)	IDAHO SECRETARY OF STATE Sociology Units Secretary of State use only IDAHO SECRETARY OF STATE State Use only IDAHO SECRETARY OF STATE IDAHO SECRET