



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

12/16/16 6:19:13

**Please type or print legibly.**

**Instructions are included on back of application.**

SECRETARY OF STATE  
STATE OF IDAHO

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

GOOD SPORTS

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

Name

JEFFREY SCOTT HANKINS  
KRISTINA MARIE HANKINS

Complete Address

3116 GARRITY BLVD. #6  
NAMPA, ID 83687

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

Retail Trade       Transportation and Public Utilities  
 Wholesale Trade       Construction  
 Services       Agriculture  
 Manufacturing       Mining  
 Finance, Insurance, and Real Estate

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

Secretary of State  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

4498 E. THOMAS MILL DR.  
NAMPA, ID 83686

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Secretary of State use only

Signature: Jeff S. Hankins

Printed Name: JEFFREY S. HANKINS

Capacity/Title: OWNER

Signature: Kristina M. Hankins

Printed Name: KRISTINA M. HANKINS

Capacity/Title: OWNER

IDaho SECRETARY OF STATE  
04/16/2012 05:00  
CK: 218 CT: 222947 BH: 1319955  
1 @ 25.00 = 25.00 ASSUM NAME # 2

D154867