

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2012 NOV 28 AM 8: 43

Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE

CAMP ROBBER MARCHMALLOWS The true name(s) and <u>business</u> address business under the assumed business in the second sec	
business under the assumed business to the business to the business to busines	Complete Address
VICTORIA ANNE MADSEN	P.O.BOX 334, HAILEY IDAHO 83333
PETER MADSEN	P.O.BOX 334, HAILEY IDAHO 83333
3. The general type of business transacted Retail Trade Transporta Wholesale Trade Constructi Services Agriculture Manufacturing Mining Finance, Insurance, and Real Est	ation and Public Utilities tion Te Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: VICTORIA MADSEN P.O.BOX 334 HAILEY, IDAHO 83333	
5. Name and address for this acknowledg copy is (if other than # 4 above):	gment
Marin Marine	Secretary of State use only
gnature: Motorca Masser	_
nted Name: VICTORIA MADSEN	
apacity/Title: OWNER	_
inted Name: PETER MADSEN	
interd Names, PRIER MADSEN	1

abn.pmd Rev. 07/2010

11/28/2012 05:00 CK: 5056 CT: 158810 BH: 1349037 1 0 25.00 = 25.00 ASSUM NAME # 2