



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2004 NOV 29 AM 9:09

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

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

McCall High Mountain Vacations

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

Name

Complete Address

DAN BRUMWELL 1008 FIREWEED PO BOX 1595 McCall ID 83638
SUSAN ASHLEY BRUMWELL 1008 FIREWEED PO Box 1595 McCall ID 83638

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

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

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

DAN BRUMWELL
PO BOX 1595
McCall Idaho 83638

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

DAN BRUMWELL
23507 E. 2ND AVE
Liberty Lake WA 99019

Phone number (optional):

Signature: [Signature]

(signature required)

Printed Name: DAN BRUMWELL

Capacity/Title: owner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
11/29/2004 05:00
CK: 3845 CT: 158010 BH: 778794
1 @ 25.00 = 25.00 ASSUM NAME # 2

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