

227



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.

2003 FEB 14 AM 8:40

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

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
<u>Dreamstate Inc.</u>	<u>115 Resort Rd.</u>
<u>(C-138418)</u>	<u>Sagle Idaho</u>
	<u>83860</u>

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:

Chip + Julie Houske
115 Resort Rd.
Sagle Idaho 83860

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

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

Houske
27401 Eastvale Rd.
Rolling Hills Est. Calif.

Phone number (optional):

208 263 5916 Resort
310 377-5231 Home

Secretary of State use only

Signature: [Signature]

(signature required)

Printed Name: Chesley R. Houske Jr.

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 09/2002

IDAHO SECRETARY OF STATE
02/14/2003 05:00
CK: 5389 CT: 158010 BH: 663841
1 @ 20.00 = 20.00 ASSUM NAME # 2

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