

CERTIFICATE OF FILED EFFECTIVE **ASSUMED BUSINESS NAME**

Pursuant to Section 53-504, Idaho Code, the undersigned SHAR -5 AM 8:53 submits for filing a certificate of Assumed Business Name SECRETARY OF STATE Please type or print legibly.

NOTE: See instructions on reverse before filing.

ousiness under the assumed business name:	
Name	Complete Address
Ezmaralda Gordon	PO Box 6472, Ketchum, ID 83340
The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Ezmaralda Gordon	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
PO Box 6472	(208) 334-2301
Ketchum, ID 83340	

g:kcorp/tomis/abn forms/abn.p65 Revised D4/2003

Signature: Ezmafalda Gordon **Printed Name:** Owner Capacity/Title:

(see instruction #8 on back of form)

03/05/2008 05:00 CK: 1432 CT: 223333 BH: 1102891 0 25:00 = 25:00 ASSUM MANE 0 2

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