



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2009 JAN 20 AM 9:33

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

SANDPOINT BUSINESS AND EVENTS CENTER

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

BRADFORD L. SCOTT
LYNDA D. SCOTT

845 EVERGREEN RD., SAGLE ID 83866
- SAME -

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

- | | |
|--|--|
| <input checked="" 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:

102 SOUTH EUCLID SUITE 300
SANDPOINT, ID. 83864

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):

- SAME -

Phone number (optional):

(208) 263 7770

Signature:

Brad Scott
(signature required)

Printed Name:

BRAD SCOTT

Capacity/Title:

OWNER

(see instruction # 8 on back of form)

Secretary of State use only

0127624

IDAHO SECRETARY OF STATE
01/20/2009 09:00
CK: 1176 CT: 233240 IN: 1152923
1 @ 25.00 = 25.00 ASSUM NAME # 2