CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

Was a series	gives notice of adoption of an A	aho Code, the Assumed Busi	undersigned JUL 20 AM 9: 15 ness Name.
1.	The assumed business name which the ubusiness is: RE/MAX of Sun Valley	indersigned us	se(s) in the transportion of DAHO
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	Name RE Professionals, LLC		mplete Address 2. N., Ste. 300
	(W12202)	Ketchum, l	ID 83340
3.	The general type of business transacted (mark only those that apply)	under the assi	umed business name is:
	Retail Trade Manufacturin Wholesale Trade Agriculture Services Construction	X Fir	ansportation and Public Utilities nance, Insurance, and Real Estate ning
4.	The name and address to which future correspondence should be addressed: RE/MAX of Sun Valley Phone number (optional): (208) 726-4901		
	P.O. Box 2744		Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	ent	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		66/7	Secretary of State use only
Signature: Joanne Stark Wetherell		Revision 12/99	IDAHO SECRETARY OF STATE
Printed	Name: Joanne Stark-Wetherell	1,085	07/20/2000 09:00 CK: 1985 CT: 133762 BH: 335838
Capaci	(see instruction # 8 on back of form)	g:korp/forms/abn.p65	1 0 20.00 = 20.00 ASSUM NAME # 2

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