

CERTIFICATE OF ASSUMED BUSINESS NAME

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

G3 JUL 21 PM 4:11

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

 The assumed business name which the und business is: 	dersigned use(s) in the transaction of
Trina McGoun J	Performance Horses
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Trica Mcbourt Loho Patrick!! Mcbourt	of the entity or individual(s) doing e: <u>Complete Address</u> Joso Placeant Valley Rd Doise To 83705
3. The general type of business transacted und	der the assumed business name is:
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson
Pose ID 83705	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above). 	Phone number (optional):
	Secretary of State use only
Signature: June Mo Lore of	No7299
Printed Name: Trince Mc Com	IDAHO SECRETARY OF STATE 97/22/2003 05:00 CK: 1259 CT: 158010 BH: 69284 1 0 25.00 = 25.00 OSIIN 6938
Capacity/Title: O w V (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE ### CONTROL OF STA