



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

10 JAN 21 AM 8:54

SECRETARY OF STATE
STATE OF IDAHO

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

Camping SupplyOUTLET.COM

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

Susan D. Anderson

522 E. PARKSIDE DR. HAYDEN, ID 83835

GARY M. ANDERSON

522 E. PARKSIDE DR. HAYDEN, ID 83835

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 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:

Susan Anderson
522 E. PARKSIDE DR
HAYDEN, ID 83835

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

(208) 334-2301

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

Signature: Susan D. Anderson
(signature required)

Printed Name: Susan D. Anderson

Capacity/Title: owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\comp\forms\abin form\abin.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
01/21/2010 05:00
CK: 1201 CT: 150810 RH: 1204343
1 @ 25.00 = 25.00 ASSUM NAME # 2

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