



# 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.**  
**Instructions are included on back of application.**

**FILED EFFECTIVE**

2014 JUN 30 AM 9:21

SECRETARY OF STATE  
STATE OF IDAHO

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

Salmon Tropics

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

Holly Cannon

2417 East Main Street

Salmon, Idaho 83467

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 |  |

Submit Certificate of  
Assumed Business  
Name and **\$25.00** fee to:

Secretary of State  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

4. The name and address to which future correspondence should be addressed:

Holly Cannon

171 Lemhi Road

Salmon, Idaho 83467

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

Signature: Holly Cannon

Printed Name: Holly Cannon

Capacity/Title: owner

Signature: Holly Cannon

Printed Name: Holly Cannon

Capacity/Title: owner

Secretary of State use only

072291

IDAHO SECRETARY OF STATE

06/30/2014 05:00

CK: CASH CT: 298467 BH: 1431171

1@ 25.00 = 25.00 ASSUM NAME #2