



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse)

FILED

98 DEC -2 AM 10:23

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name

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

K & M Adventures

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	Complete Address
<u>Kym R Gunnell</u>	<u>P.O. Box 287 Hansen ID 83334</u>
<u>Mary A Gunnell</u>	<u>P.O. Box 287 Hansen ID 83334</u>

3. The general type of business transacted under the assumed business name is: (mark only those that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

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

Phone number (optional): _____

K & M Adventures
P.O. BOX 5691
Twin Falls ID 83303

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

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature: Mary A Gunnell
Printed Name: Mary A Gunnell
Capacity: Partner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

12/02/1998 09:00
CK: 1033 CT: 107550 BH: 166594

1 @ 20.00 = 20.00 ASSUM NAME # 2

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