



CERTIFICATE OF ASSUMED BUSINESS NAME

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

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:

Wilderness Skills

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

Stacy Gebhards

13910 Hollenbeak Wy, McCall, ID 83638

Maria Gebhards

(Same)

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

☒ Retail Trade

☐ Manufacturing

☐ Transportation and Public Utilities

☒ Wholesale Trade

☒ Agriculture

☐ Finance, Insurance, and Real Estate

☒ Services

☐ Construction

☐ Mining

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

Phone number (optional): (208) 631-3216

Stacy Gebhards

13910 Hollenbeak Way

McCall ID 83638

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: Stacy Gebhards

Printed Name: Stacy Gebhards

Capacity: Manager

(see instruction # 8 on back of form)

Secretary of State use only
IDAHO SECRETARY OF STATE

02/13/1998 09:00
CK: 2072 CT: 94232 BH: 82050

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Revision 1/98

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