



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 MAR 26 AM 9:21

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

BRIDGES HOME

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

DAVID GUNTER

1606 NORTHSIDE DR, SANDPOINT, ID 83864

TAMI BELZOR GUNTER

1606 NORTHSIDE DR., SANDPOINT, ID 83864

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" 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:

DAVID GUNTER
1606 NORTHSIDE DR.
SANDPOINT, ID 83864

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

(SAME)

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

Secretary of State use only

Signature: [Signature]

Printed Name: DAVID GUNTER

Capacity/Title: PARTNER

Signature: [Signature]

Printed Name: Tami Belzor Gunter

Capacity/Title: Partner

IDAHO SECRETARY OF STATE
03/26/2014 05:00
CK: 6041 CT: 150010 BH: 1417166
1 @ 25.00 = 25.00 ASSUM NAME # 2

D/6 9962