

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

	Northwest	Hunt Clul)	
the true name(s) and business address(es) business under the assumed business name Name Timothy Evans Christina Evans		, , , , , , , , , , , , , , , , , , , ,		
VIHIBURA EVAIIS		1420 N. Clowil Ave, Coeul a Alerie, la 650 lo		
☑ Retail Tr				**************************************
Services Manufact Finance, Tim Evans			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 accopy is (if other	Idress for this acknowledgmer	nt		
			Secretary of State use only	•
nature: Time	(signature required)	g-komptionnshieten formstellen.p65 Revieed 04/2003		
nted Name:	Tim Evans	formstelden form Ravieed 04/2003		
pacity/Title:(see instruc	President tion # 8 on back of form)	дисо, б	IBAHO SECRETARY 88/87/208 9 CK: 1012 CT: 239453 1 8 25.00 = 25.00	05:0