



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED/EFFECTIVE

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.

01 SEP 25 AM 9:54

SECRETARY OF STATE
STATE OF IDAHO

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

Arrow Tip Archery

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>Billy Peters</u> | <u>730 MALTA Ave, Burley Id 83318</u> |
| _____ | _____ |
| _____ | _____ |

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:

Billy Peters

730 MALTA Ave

Burley Id 83318

Phone number (optional): (208) 878-5477
cell (208) 670-0078

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

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

Secretary of State use only

Signature: Billy Peters

Printed Name: Billy Peters

Capacity: _____

(see instruction # 8 on back of form)

Revision 1/98

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IDAHO SECRETARY OF STATE
09/25/2001 05:00
CX: 1462 CT: 151698 BH: 420933
1 @ 20.00 = 20.00 ASSUM NAME # 2

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