CERTIFICATE OF ASSU (Please type or print legibly.	See instructions on reverse.)
To the SECRETARY OF STATE, STA  Pursuant to Section 53-504, Ida  gives notice of adoption of an A	Assumed Business Name TATE or UF State
The assumed business name which the unbusiness is:  Sun Valley Fire	
<ol><li>The true name(s) and business address(e business under the assumed business named)</li></ol>	, , , , , , , , , , , , , , , , , , ,
<u>Name</u>	Complete Address
John T. FLynt	3170 Snow Bank DR, Hailey Id. 88333 P.O. Box 2171, Ketchum Td 83340
	P.O. Box 2171, Ketchum Td 83340
3. The general type of business transacted under the assumed business name is:  (mark only those that apply)	
☐ Retail Trade ☐ Manufacturin☐ Wholesale Trade ☐ Agriculture☐ Services ☐ Construction☐	Finance, Insurance, and Real Estate
correspondence should be addressed:	Phone number (optional): 208 - 720-3355
P.O. Box 2171 Ketchum, Td 83340	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	I INNER SECRET ARY and Colored
	02/14/2001 09:00 CK: 5827 CT: 142263 BH: 379817
Signature: John 7 Flyn	1 9 20.00 = 20.00 ASSUM NAME 1 2
Printed Name. John T. Flynt	D C12664
Capacity:	pyourstabn.p65
ICAA INSTRUCTION II X ON NOCK OF TOTAL	