



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

03 APR 11 PM 4:15

SECRETARY OF STATE
STATE OF IDAHO

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

VENTURE TO VENTURE

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

Harold Hinshaw

8949 Brekenridge Dr., Garden City, Id. 83714

Glaida Hinshaw

8949 Brekenridge Dr., Garden City, Id. 83714

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Harold Hinshaw

8949 Brekenridge Dr

Garden City, Id. 83714

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

Phone number (optional):

Signature: _____

(signature required)

Printed Name: _____

Glaida Hinshaw

Capacity/Title: _____

Owner

(see instruction # 8 on back of form)

Secretary of State use only

D 64370

IDAHO SECRETARY OF STATE
04/14/2003 05:00

CK: 515 CT: 158818 BH: 674441

1 @ 25.00 = 25.00 ASSUM NAME # 2