



CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 MAY 18 AM 9:45

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:

Crow's Landing Dressage Facility

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

Stephen Lee Crow

P.O Box 96 Fruitland, Idaho 83619

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:

Stephen Crow

P.O Box 96

Fruitland Idaho 83619

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

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

Secretary of State use only

Signature: Stephen A. Crow

Printed Name: STEPHEN CROW

Capacity/Title: OWNER

Signature: Stephen A. Crow

Printed Name: STEPHEN CROW

Capacity/Title: _____

IDAHO SECRETARY OF STATE
05/18/2011 05:00
CK: 2752 CT: 258945 BH: 1274269
1 @ 25.00 = 25.00 ASSUM NAME # 2

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