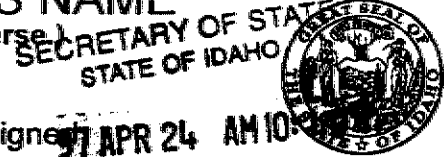


D 3825

**CERTIFICATE OF ASSUMED BUSINESS NAME**

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



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.

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

Masoner Ski Shop

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

NameComplete AddressGary N. Masoner430 Diana Drive, Heyburn, Id 83336JoAnn Masoner430 Diana Drive, Heyburn, Id 83336

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

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

4. The name and address to which future correspondence should be addressed: Phone number (optional): \_\_\_\_\_

U.S. Bank of IdahoP.O. Box 7506Boise, Id 83707

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE

DATE 04/24/1997

0900 86160 2

CK #: 755 CUST# 3859

ASSUM NAME 1@ 20.00= 20.00

Signature: Jo Ann MasonerPrinted Name: JoAnn MasonerCapacity: Proprietor

(see instruction # 8 on back of form)

Revision 2/87  
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# : D