

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

11 AUG 12 AM 8:53

SECRET BY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

	Blaine Manor
The true name(s) and <u>business</u> add business under the assumed busine Name Croy Canyon Ranch Foundation The (C140673)	Complete Address 706 S. Main Street STE 7
(6140615)	P.O. Box 640
	Hailey ID 83333-0640
= =	Submit Cartificate of
Finance, Insurance, and Real	
The name and address to which fut correspondence should be address Kathleen J. Eder, ExecutiveK Director	sed: 450 North 4th Street PO Box 83720
P.O. Box 640	Boise ID 83720-0080 208 334-2301
Hailey ID 83333	200 334-230 (
. Name and address for this acknowl copy is (if other than # 4 above):	ledgment
Whin not	Secretary of State use only
pature <u>Fathther</u> &	OR I
ted Name: Kathleen J. Eder	
acity/Title: Executive Director	
ature:	IDAHO SECRETARY OF STATE
ted Name:	
	1 8 25.00 = 25.00 ASSUM NAME
acity/Title:	

abn.pmd Rev. 07/2010

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