

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 business is:

ANTELOPE INN

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

Name

Complete Address

TOM HARVEY

7048 MAIN ST KENDRICK, ID

JOAN VITOU

✓ ✓ ✓ 83537

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

(mark only those that apply)



Retail Trade



Manufacturing



Transportation and Public Utilities



Wholesale Trade



Agriculture



Finance, Insurance, and Real Estate



Services



Construction



Mining

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

Phone number (optional):

208-289-5771

TOM HARVEY

P.O. BOX 124

KENDRICK, ID 83537

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

SAME

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

12/17/1998 09:00
CK: 68882243714 CT: 100285 BH: 171848

1 @ 20.00 = 20.00 ASSUM NAME # 2

D20990

Signature: Tom Harvey

Printed Name: TOM HARVEY

Capacity: OWNER

(see instruction # 8 on back of form)

Revision 2/97

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