



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 DEC 30 AM 8:52

Please type or print legibly.
Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

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

MAC CREEK LEGENDS

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

<u>Name</u>	<u>Complete Address</u>
<u>LARRY T. HARWOOD</u>	<u>P.O. Box 3630 HAYDEN, ID 83835</u>
<u>LINDA A. HARWOOD</u>	<u>SAME</u>
	<u>(208) 818-2319</u>

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:

LARRY T. HARWOOD
P.O. Box 3630
HAYDEN, ID 83835

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

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

Secretary of State use only

Signature: Larry T. Harwood

Printed Name: LARRY T. HARWOOD

Capacity/Title: OWNER

Signature: Linda A. Harwood

Printed Name: LINDA A. HARWOOD

Capacity/Title: Co-OWNER

IDAHO SECRETARY OF STATE
12/30/2011 05:00
CK: 4344 CT: 150018 BH: 1303919
1 @ 25.00 = 25.00 ASSUM NAME # 2

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