

## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned APR -8 AM 9: 28

Please type or print legibly.
Instructions are included on back of application. SECRETARY OF STATE OF IDALIG

<ol> <li>The assumed business name which th business is:</li> </ol>	e undersigned	STATE OF IDAH()  i use(s) in the transaction of		
Summi	t Outfitters	S	<del></del>	
<ol><li>The true name(s) and <u>business</u> address business under the assumed business</li></ol>	· ·	ntity or individual(s) doing		
<u>Name</u>		Complete Address		
Duane S.S. Whipple	2835 No	rth 3300 West Moore, ID 83	255	
Monarae Whipple	2835 No	rth 3300 West Moore, ID 83	255	
Duane M Whipple	2835 No	rth 3300 West Moore, ID 83	255	
☐ Wholesale Trade ☐ Construc	ation and Pub tion			
		Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:		
4. The name and address to which future correspondence should be addressed:  Summit Outfitters  c/o Duane Whipple  2835 North 3300 West Moore, II	-	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301		
5. Name and address for this acknowledge copy is (if other than # 4 above):	 gment 			
nature: Monarae Whipe		Secretary of State use only		
nted Name: Monarae Whipple				
pacity/Title: Partner				
nature: <u>Duamu 55 Whipple</u>	_			
nted Name:Duane_SS_Whipple		IDAHO SECRETARY OF ST	ATE	
pacity/Title: Partner		04/08/2013 05	00	

abn.pmd Rev. 07/2010