

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

Partner

Partner

Capacity/Title(

Printed Name: _

Capacity/Title:

Signature:

The assumed business name which the undersign business is: Linda Vista Mobile	_	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Ron Kennedy 2216 W. Cleary Cary Gustin 1183	Complete Address	
3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		
4. The name and address to which future correspondence should be addressed: Linda Vista Mobile Home Park PO BOX 1059 Middleton, ID 83644	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
5. Name and address for this acknowledgment copy is (if other than # 4 above):		
Signature: Pon Kennedy Printed Name: Ron Kennedy	Secretary of State use only	11

abn.pmd Rev. 07/2010

IDAHO SECRETARY OF STATE 12/15/2010 05:00 CK: 3329 CT: 253542 BH: 1251822 1 8 25.00 = 25.00 ASSUM MANE # 2

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