

Signature:\_

Printed Name: \_\_

Capacity/Title:\_

## FILED EFFECTIVE **CERTIFICATE OF** ASSUMED BUSINESS NAME 95 607 13 /// 9:17 Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

NOTE: See instructions on reverse before filing.

Outabou	nds Lounge
2. The true name(s) and business address(es business under the assumed business nam Name  St. Mary R.B. Inc.	of the entity or individual(s) doing ne: Complete Address P.O. Box 1808 Sun Valley, ID 83353
The general type of business transacted un  Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:  R. H. "Rocky" Black P.O. Box 1808 Sun Valley, ID 83353	der the assumed business name is: and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Surr Valley, ID 65555	
Name and address for this acknowledgmen copy is (if other than #4 above):	t Phone number (optional):  208-726-6279

R. H. "Rocky" Black

Vice President

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE
10/14/2005 05:00
CK: 54824 CT: 193237 BH: 916824
1 0 25.00 = 25.00 ASSUM NAME # 2