

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.

2004 JUN 21 AM 8: 56

Please type or print legibly.
NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

: Sign of IDAHO

| 1. The assumed business name which the undersigned use(s) in the transaction of | |
|--|-------------------------------------|
| - Biver City Skate Center | |
| The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: | |
| Name | Complete Address |
| William F Sugden | 1521 C+1 AVIT 4000 |
| Michelle K Sunden | Lewiston, Id. 83501-1536 |
| | 1 puiston T 1 02 Tal 1/2/ |
| 0 7 | Lewiston, 1a. 85501-1536 |
| The general type of business transacted under the assumed business name is: | |
| | |
| | and Public Utilities |
| Wholesale Trade Construction Services Agriculture | |
| , direction | Submit Certificate of |
| ☐ Manufacturing ☐ Mining | Assumed Business |
| Finance, Insurance, and Real Estate | Name and \$25.00 fee to: |
| The name and address to which future | Secretary of State |
| correspondence should be addressed: | 700 West Jefferson |
| William Sugden | Basement West |
| 1921 Pl | PO Box 83720 |
| 1821 Block Dr | Boise ID 83720-0080 208 334-2301 |
| Lewiston ID 83501 | 200 334-2301 |
| 5. Name and address for this acknowledgmen | nt Phone number (optional): |
| COpy is (if other than # 4 above): | |
| | 208-791-7046 |
| | |
| | Secretary of State use only |
| | |
| Signature; (Signature required) | 88 88 88 |
| Printed Name: William F Sugden | Pavisad 04/2003 |
| Capacity/Title: Owner | India Crapes |

IDAHO SECRETARY OF STATE

96/21/2004 05:00

CK: 1887 CT: 158818 BH: 751487
1 8 25.88 = 25.88 ASSUM MANE # 2