

CERTIFICATE OF ASSUMED BUSINESS NAME

TILED EFFECTIVE

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

	STATE OF 10.4.10
The assumed business name which the under business is:	ersigned use(s) in the transaction of
SHOTSWELL'S GUNS	
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name DAVE SHOTSWELL	of the entity or individual(s) doing e: <u>Complete Address</u> <u>567 N. IO W. SHOSHONE, I</u> D. <u>83352</u>
3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities	
Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: DAVE SHOTSWELL	Secretary of State 700 West Jefferson Basement West PO Box 83720
567 N. 10 W. SHOSHONE, IDAHO 83352	Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmen copy is (if other than # 4 above). 	Phone number (optional): 208-358-0268
	Secretary of State use only
Signature: Signature required) Printed Name: DAVE SHOTSWEU Capacity/Title: OWNER (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 97/08/2003 65:00 CK: 3912 CT: 158010 BH: 689813 1 @ 25.00 = 25.00 ASSUM NAME # 2