



CERTIFICATE OF ASSUMED BUSINESS NAME

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.

FILED/EFFECTIVE

APR 19 AM 10:10

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Sun Valley STTOOLS

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

<u>Name</u>	<u>Complete Address</u>
<u>Pat, Kerri McCusker</u>	<u>PO Box 2688 Hailey ID 83333</u>
<u>Irwin R, Linda F Berman M.D.</u>	<u>146 Shore Rush Dr.</u>
<u>Harlan Hambright</u>	<u>521 Oglethorpe Ave</u>

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input checked="" type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

same
city &
state
ST Simon
Island
GA.
31522

4. The name and address to which future correspondence should be addressed:

Pat, Kerri McCusker
PO Box 2688
Hailey ID 83333

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
→ PO Box 83720
Boise ID 83720-0080
208 334 2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

same as above

Phone number (optional):

208-788-5834

Signature: Kerri McCusker

Printed Name: Kerri McCusker

Capacity: owner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

04/19/2001 09:00
CK: 1015 CI: 145257 BH: 392112

1 @ 20.00 = 20.00 ASSUM NAME # 2

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Revised 01/2001

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