



# 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.**

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

Adventure Property Management

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

Justin Name Wilcomb

Complete Address

2505 S. Bluegrass Dr.

2505 S. Bluegrass Dr.

Nampa, Idaho

Nampa, Idaho

(Justin Robert Wilcomb) 83686

83686

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 checked="" type="checkbox"/> Services                 | <input type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |  |

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

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

2505 S. Bluegrass Dr.  
Nampa, Idaho 83686

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

Phone number (optional):

208-461-4712

Signature: [Signature]

(signature required)

Printed Name: Justin Wilcomb

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE  
05/24/2004 05:00  
CK: 1319 CT: 150018 BH: 746629  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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