CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name, 99 July 20 1. The assumed business name which the undersigned use(s) in the transaction of , business is: STATE OF WAH Treasure Valley Pool and Spa 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address rolele Coriffiths 3. The general type of business transacted under the assumed business name is: (mark only those that apply) **Retail Trade** Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): _ correspondence should be addressed: Submit Certificate of Assumed Business Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301

Printed Name: Royal

Capacity: ___OWN&\

(see instruction #8 on back of form

Name and \$20.00 fee to:

Secretary of State use only

IDANO SECRETARY OF STATE

07/26/1999 **09:00** CX: 1984 CT: 118396 M: 236512

29.98 = 28.90 ASSEM NAME 8

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