

## 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.

(see instruction # 8 on back of form)

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SECRETARY OF STATE STATE OF ID VIO

Investment Adventures  2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:  Name  Complete Address	
Anthony R. Dudley	
	Bellevue, Id 83313
3. The general type of business transacted under the	
<ul> <li>Wholesale Trade</li></ul>	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
Investment Adventures	PO Box 83720
P.o box 4421	Boise ID 83720-0080 208 334-2301
Hailey, Id 83333	200 00 . 200 .
5. Name and address for this acknowledgment	Phone number (optional):
COPY is (if other than # 4 above).	208-720-5153
	Secretary of State use only
nature: Ahony (signature required)  nted Name: Anthony R. Dudley  pacity/Title: Presidnet/Owner	IDAHO SECRETARY OF STATE <b>91/23/2006 05:0</b> CK: 8491763981 CT: 158010 DH: 93 1 8 25.00 = 25.00 ASSUM NAME