

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

**FILED/EFFECTIVE**



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:

2003 FEB 10 AM 9:50

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

SHADY HILL STUDIOS

SECRETARY OF STATE  
STATE OF IDAHO

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

<u>Name</u>	<u>Complete Address</u>
<u>IRWIN SENTILLES</u>	<u>PO 4724</u>
	<u>KETCHUM ID 83340</u>

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

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

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

Phone number (optional): \_\_\_\_\_

SHADY HILL STUDIOS  
PO. Box 4724  
KETCHUM ID 83340

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):

BANK OF AMERICA  
PO. Box 299  
KETCHUM ID 83340

Signature: [Handwritten Signature]

Printed Name: IRWIN SENTILLES

Capacity: owner

(see instruction # 8 on back of form)

Secretary of State use only

Revision 2/97

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IDAHO SECRETARY OF STATE  
 02/10/2003 05:00  
 CK: 3760203960 CT: 150010 BH: 661003  
 1 @ 20.00 = 20.00 ASSUM NAME # 2

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