

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.

FILED



99 FEB-8 AM 9:09

1. The assumed business name which the undersigned use(s) in the transaction of business is: **SECRETARY OF STATE STATE OF ALABAMA**

SECRETARY OF STATE
STATE OF IDAHO

Business is: Continental Divide Outfitters 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>Craig Baxter</u>	<u>Box 217, North Fork 83466</u>
<u>Mike Cummings</u>	<u>Box 132, North Fork 83466</u>

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 correspondence should be addressed:

Phone number (optional): 208 - 865-2601

PO Box 132
North Fork ID
83466

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

**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

SECRETARY OF STATE USE ONLY

02/08/1999 09:00
CX: 3581 CT: 118765 BH: 185773

1 0 20.00 = 20.00 ASSUM NAME # 2

Signature: Mrs. Cunningham

Printed Name: Mike (unning) / CRAIG Baxter

Capacity:

(see instruction # 8 on back of form)