

CERTIFICATE OF ASSUMED BUSINESS NAME

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·	FILED EFFECTIVE
CERTIFICATE OF	20. FECTIVE
ASSUMED BUSINESS	NAME CO
Pursuant to Section 53-504, Idaho Code, the	undersigned
submits for filing a certificate of Assumed But	siness Name.
Please type or print legibly.	Same of the same o
NOTE: See instructions on reverse before	NAME undersigned siness Name. filing. ersigned use(s) in the transaction of
The assumed business name which the under business is:	ersigned use(s) in the transaction of
THE TOWERS A	T RIVERSTONE
The true name(s) and business address(es) business under the assumed business name Name MICHAEL R. CHAPMAN	of the entity or individual(s) doing e: Complete Address PO BOX 1600, COEUR D'ALENE, ID 83816
Retail Trade	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 Phone number (optional):
	Secretary of State use only
Printed Name: MICHAEL R. CHAPMAN AUTHORIZED AGENT	Solver (1988) 1000