Signature

Capacity:\_

Printed Name:

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

۷.	Correspondence should be addressed:  Fun In the Sun Travel  P. D. Box 3713  Submit Certificate of Assumed Business Name and \$20.00 fe	f
7.	correspondence should be addressed:	1-2403
1	The name and address to which future Phone number (optional): 208 578	2 0.4.5
	Retail Trade	blic Utilities d Real Estate
3.	The general type of business transacted under the assumed business name (mark only those that apply)	e is:
	- 218 MARIPOSA Rd	
	Linda Bennett Eldred Po. Box 3713	
2.	<ol><li>The true name(s) and business address(es) of the entity or individual(s) do business under the assumed business name is/are:</li></ol>	ing
	business is:  Fun In the Sun Travel	
1.	gives notice of adoption of an Assumed Business Name.  STATE  1. The assumed business name which the undersigned use(s) in the terms.	4 AM 9:57  CY OF STATE OF IDAHO
		M M T T T T

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IDAHO SECRETARY OF STATE

12/14/2000 09:00 CK: 2022 CT: 13%27 BH: 366662

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