



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.  
Filing fee: \$25.00.

**FILED EFFECTIVE**

**2016 SEP 16 AM 9:01**

**SECRETARY OF STATE  
STATE OF IDAHO**

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

Fall River Hideaway

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Dwayne Seeley 33 So. 5th West Rexburg, ID 83440  
(Name) (Address)

Kera S. Day 975 So. 5500 West Rexburg, ID 83440  
(Name) (Address)

Brenda S. Garner 13922 So. White Tail Cove, Bluffdale, UT 84065  
(Name) (Address)

Connie S Thorkelson 13202 Wood Park Drive, Herriman, UT 84096  
(Name) (Address)

3. The general type of business transacted under the assumed business name is:

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

4. Mailing address for future correspondence:

Dwayne Seeley  
(Name)  
33 So. 5th West  
(Address)  
Rexburg, ID 83440  
(City) (State) (Zipcode)

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

\_\_\_\_\_  
(Name)  
\_\_\_\_\_  
(Address)  
\_\_\_\_\_  
(City) (State) (Zipcode)

Printed Name: Dwayne Seeley

Signature: Dwayne Seeley

Printed Name: Kera S. Day

Signature: Kera S. Day

Printed Name: Brenda S Garner

Signature: Brenda S Garner

Connie S. Thorkelson  
Connie S Thorkelson  
Rev. 08/2015

Secretary of State use only

IDAHO SECRETARY OF STATE  
**09/16/2016 05:00**  
CK:5060 CT:329123 BH:1546665  
10 25.00 = 25.00 ASSUM NAME #2

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