FILED EFFECTIVE



## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2005 JUN -2 47 0:47

Please type or print legibly. NOTE: See instructions on reverse before filing.

THE CLASSIC THEATRE CO	DMPANY OF SUN VALLEY
The true name(s) and business address(e business under the assumed business and	s) of the entity or individual(s) doing
business under the assumed business nar Name	ne:
JAMES S. REYNOLDS	Complete Address
	PO BOX 100 1194 GANNETT ROAD
	BELLEVUE 10 83313
The general type of business transacted un	
Retail Trade Transportation	and Public Utilities

Signature: Signature required

Printed Name: JAMES S. REYNOLDS Capacity/Title: ARTISTIC DIRECTOR (see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

@6/@2/20@5 @5:00

CK: 1503 CT: 150010 BH: 813784
1 0 25.00 = 25.00 ASSUM NAME # 2

D 88 375