Capacity: Pacs.

(see instruction # 8 on back of form)

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.	
 The assumed business name which the und business is: 	lersigned use(s) in the transaction of
SHOOTERS NIGHT CLE	15 N
0 The force was (A) and 11 (A)	16
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>	Complete Address
	No 1.0. DX 51306 FRANK FALLS FD 834
(C12800Z)	
	:
The general type of business transacted unit (mark only those that apply)	der the assumed business name is:
Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
The name and address to which future Pl correspondence should be addressed:	none number (optional):
SHOOTERS NIGHT CLUS	Submit Certificate of
378 BROADWAY	Assumed Business Name and \$20.00 fee to:
IDAHO FALLS, ID 83402	Secretary of State
5. Name and address for this acknowledgmen	
COPY is (if other than # 4 above): # シタ 州モのうい	PO Box 83720 Boise ID 83720-0080
P.O. Box 5/306	208 334-2301
310. Box 37306	Secretary of State use only
FDAHO FALLS ID \$3405	IDAHO SECRETARY OF STATE 12/14/1999 69:66 CV: 1882 CV: 124846 DV: 277595
Signature:	12/14/1999 09:00 CX: 1882 CT: 124846 1H: 273525
Printed Name: A JAY HESOON	1 0 20.00 = 28.00 ASSUM NAME # 2

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