



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2005 NOV 10 AM 8:54

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Trail Break R.V. Park

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Nancy K. KURTZE

432 N. Bannock St. Glenns Ferry ID 83623

Bonnie J. DeWilde

432 N. Bannock St. Glenns Ferry ID 83623

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

☒ Retail Trade

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Construction

☒ Services

☐ Agriculture

☐ Manufacturing

☐ Mining

☐ Finance, Insurance, and Real Estate

4. The name and address to which future correspondence should be addressed:

Nancy KURTZE or Bonnie DeWilde
432 N. Bannock Box A
Glenns Ferry, ID, 83623

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

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

Phone number (optional):

208-366-7745

Signature: _____

(signature required)

Printed Name: Nancy KURTZE

Capacity/Title: owner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
11/10/2005 05:00
CK: 1005 CT: 150010 BH: 921543
1 @ 25.00 = 25.00 ASSUM NAME # 2

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