	CERTIFICATE OF		FILED EFFECTIVE
	ASSUMED BUSINESS	NAME	09 JUN 29 AM 9: 25
Pursuant to Section 53-504, Idaho Code, the undersigned			
	submits for filing a certificate of Assumed B	usiness Name.	SECRETARY OF STATE
Please type or print legibly. NOTE: See instructions on reverse before filing.			STATE OF IDAHO
<ol> <li>The assumed business name which the undersigned use(s) in the transaction of business is:</li> </ol>			
River City Property Management			
<ol><li>The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:</li></ol>			
	Name	Co	omplete Address
Norman Rehrmann		2600 E Seltice, Ste A PMB 248	
	Paula Rehrmann		Post Falls, ID 83854
1 A.			
4. The correct 260 Po 5. Na cor	general type of business transacted un         Retail Trade       Transportation         Wholesale Trade       Construction         Services       Agriculture         Manufacturing       Mining         Finance, Insurance, and Reat Estate         name and address to which future         espondence should be addressed:         orman)( & Paula Rehrmann         00 E Settice, Ste A PMB 248         st Falts, ID 83854         me and address for this acknowledgme         Dy is (if other than # 4 above):	and Public U	Jtilities Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
			Secretary of State use only
	1 11	1,p85	
Signature:			
Signature:			
Capacity/Title: <u>Owner</u> 1 # 25.09 = 25.09 ASSUM NAME # 2			
	(see instruction # 8 on back of form)		
D131865			