

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.

Please type or print legibly.

Instructions are included on back of application.

2013 JAN 31 AM 9:28
SECRETARY OF STATE
STATE OF IDAHO

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

CoF

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

Name

Sun Valley Center for the Arts, Inc.

C43557

Complete Address

P.O. Box 656, Sun Valley, Idaho 83353

191 Fifth Street East, Ketchum, Idaho 83340

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

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

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

Sun Valley Center for the Arts, Inc.

P.O. Box 656

Sun Valley, Idaho 83353

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

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

Signature: Sally Boettger

Printed Name: Sally Boettger

Capacity/Title: Co-Executive Director

Signature: Kristin Poole

Printed Name: Kristin Poole

Capacity/Title: Co-Executive Director

IDAHO SECRETARY OF STATE
02/01/2013 05:00
CK: 2722 CT: 260799 BH: 1350270
1 @ 25.00 = 25.00 ASSUM NAME # 2

abn.pmd Rev. 07/2010

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