227



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

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SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigned use(s) in the transaction of business is:									
	Devil Creek RV Park		***************************************							
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):									
	Lynn D Stokes		25 N Old Hwy							
	(Name) (Addross)									
	Valorie S Stokes	91 Malad City, ID 83252								
	(Name) (Address)									
	(Name)	(Address)								
	(Name)	(Address)								
						Transportation and Public Utilities Mining Finance, Insurance, and Real Estate Name and address for this acknowledgment copy is (if other than #4):				
	Valorie S Stokes					·				
	(Name) 6325 N Old Hwy 191			Ĭ	Name)		 			
	(Address) Malad City	Œ	83252	Č	Address)					
	(City)	(State)	(Zipcode)	7	City)		(Slafe)	(Zipcode)		
) 	nted Name: Valorie S St	okes				Secretary of	State use only	*****	_	
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		2) /2	9-4625				27/2018			
Pri	nted Name: Lynn D Stol	(es				-	•	BH:1634682	2	
Sig	nature: Lynd In	15	· · · · · · · · · · · · · · · · · · ·		:	10 25.00	= 25.00 A	SSUM NAME #	ŧ2	
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