



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

01 JAN 26 PM 12: 2

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

BROWNLEE RESERVOIR CHARTERS

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

Name

Thomas J. Wing

Complete Address

2472 W. FORECAST ST.
MERIDIAN ID 83640 83642

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:

SAME AS ABOVE

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):

SAME AS ABOVE

Phone number (optional):

208-890-9710

Secretary of State use only

Signature: Thomas J. Wing

(Signature required)

Printed Name: Thomas J. Wing

Capacity/Title: OWNER

(see instruction # 8 on back of form)

9 corp/turnstabin forms abn 265
Revised 04/2003

IDAHo SECRETARY OF STATE
01/27/2004 05:00
CK: CASH CT: 150010 BH: 723986
1 P 25.00 = 25.00 ASSUM NAME # 2

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