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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.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE
STATE OF IDAHO

	15/1/0
The assumed business name which the undersigned business is: Reno Club	use(s) in the transaction of
2. The true name(s) and business address(es) of the end business under the assumed business name: Name Cavolyn House F. Donglas House	ntity or individual(s) doing Complete Address Box 484, Elk City, IA 83525 Box 484, Elk City, ID 83525
3. The general type of business transacted under the a	ssumed business name is:
Retail Trade	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 Phone number (optional): (208)842-2292
	Secretary of State use only
Signature: <u>Arolyn Howe</u> Printed Name: <u>Carolyn Howe</u> Capacity/Title: <u>Owner</u>	IDAHO SECRETARY OF STATE 21/11/2027 05=00 CX: 181 CT: 158818 BH: 1825559 1 0 25.08 = 25.00 ASSUM MAME # 2

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