

# CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO

97 OCT 16 AM 8:31

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

SECRETARY OF STATE  
STATE OF IDAHO

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

Half Moon Rising

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

Name Patty Lyons Address 6 E 550 South - Victor, ID 83455

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

6 & 7  
See categories on the reverse

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

Patty Lyons  
PO Box 826 - Diggins ID 83422

Signed

By

Capacity

[Signature]  
Sole Owner/Proprietor

Submit Certificate of Assumed  
Business Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
PO Box 83720  
Boise ID 83720-0080

Customer #

Secretary of State use only  
IDAHO SECRETARY OF STATE

10/16/1997 09:00  
CK: NO CK # CT: 88559 BH: 47298

1 @ 20.00 = 20.00 ASSUM NAME

08960

Revision 10/96

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