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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.

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

Turning Winds Expeditions

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

Name

Complete Address

Charmaise Baisten

P.O. Box 2348

Hayden, Idaho

83854

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

- | | |
|--|--|
| ☐ Retail Trade | ☐ Transportation and Public Utilities |
| ☐ Wholesale Trade | ☐ Construction |
| ☒ Services | ☐ Agriculture |
| ☐ Manufacturing | ☐ Mining |
| ☐ Finance, Insurance, and Real Estate | |

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

Turning Winds Expeditions
P.O. Box 2348
Hayden, Idaho 83854

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

Same

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

Secretary of State use only

Signature: Charmaise Baisten

Printed Name: CHARMAISE BAISTEN

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Rev 04/12/2001

IDAHO SECRETARY OF STATE
05/02/2002 05:00
CK: 8888 CT: 158010 BH: 463106
1 @ 20.00 = 20.00 ASSUM NAME # 3

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