



# 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.

FILED EFFECTIVE  
2004 MAY 24 PM 2:45  
STATE OF IDAHO

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

V. oner Mobil Home Park

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

Anna Mae Cox

P.O. Box 1169, Idaho City, Id 83631

Karen Moss

P.O. Box 1170, Idaho City, Id 83631

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:

Karen Moss, P.O. Box 1170  
Idaho City, Id 83631

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature

Anna Mae Cox

Printed Name:

Anna Mae Cox

Capacity/Title:

owner

(see instruction # 8 on back of form)

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):

208-392-6092

Secretary of State use only

IDAHO SECRETARY OF STATE  
05/25/2004 05:00  
CK: NO CK # CT: 179511 BH: 746914  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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