## CERTIFICATE OF ASSUMED BUSINESS NAMES (Please type or print legibly. See Instructions on reverse.)

	To the SECRETARY OF STATE, STA Pursuant to Section 53-504, Id gives notice of adoption of an A	aho Code,	the undersigned 2
1.	The assumed business name which the undersigned use(s) in the transaction of business is:		
	OAKCREEK VILLAGE		
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  Complete Address		
			S S T P S T S T S T S T S T S T S T S T
	20TH CENTURY FORD, INC.	1090 FO	RDWAY, BLACKFOOT, ID 83221
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)		
	X Retail Trade Manufacturir   X Wholesale Trade Agriculture   Services Construction	. 🔲	Transportation and Public Utilities Finance, Insurance, and Real Estat Mining
4.	correspondence should be addressed:	Phone num	nber (optional): 785-1 <b>9</b> 00
	20TH CENTURY FORD, INC.		Submit Certificate of
	1090 FORDWAY		Assumed Business
	BLACKFOOT, ID 83221		Name and \$20.00 fee to:
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	nt	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
			Secretary of State use only
gnatu	ife: 18han Mad	Revision 1/98	IDAHO SECRETARY OF STATE  96/15/2000 99:00  CK: 7881 CT: 3117 BH: 326574

Printed Name: Brian Waltson

(see instruction # 8 on back of form)

1 @ 28.88 = 20.88 ASSUM MANE # 2

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