



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned

gives notice of adoption of an Assumed Business Name

NOV 2 10:25
SECRETARY OF STATE
STATE OF IDAHO

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

SALMON MOUNTAIN TRAVEL CO.

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

DOROTHY MARIE MCKINNEY

HC 10 BOX 26, CARMEN, ID83462

MARCIA ANN FAULKNER

HC 10 BOX 26, CARMEN, ID 83462

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

4. The name and address to which future correspondence should be addressed: Phone number (optional): (208) 756-4437

SALMON MOUNTAIN TRAVEL CO
102 SO. ST. CHARLES
SALMON, ID 83467

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

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

Signature: Dorothy Marie McKinney

Printed Name: DOROTHY MARIE MCKINNEY

Capacity: GENERAL PARTNER

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

11/02/1998 09:00
CK: 2584 CT: 106162 BH: 158099

1 @ 20.00 = 20.00 ASSUM NAME # 2

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