

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.

(see instruction # 8 on back of form)

cdalakecharters	
The true name(s) and business address(es) business under the assumed business name	
Name	Complete Address
Ron Cavalin	2888 E.Murphy Road Coeurdalene,ld 83814
'ha annul tura af haire a tarriar a	dor the governed business and
he general type of business transacted und	uei the assumed dusiness name is:
☐ Retail Trade ☐ Transportation	and Public Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
•	Basement West
2888 E.Murphy Rd. Cda,ld. 83814	PO Box 83720
	Boise ID 83720-0080 208 334-2301
	E00 004-200 i
Name and address for this acknowledgme	nt
COPY is (if other than #4 above):	
	Secretary of State use only
	100
	- 14 3
d Name: Ron CAVALO	IDAHO SECRETARY OF OS /22/2007 CX: 7798 CT: 158818 B

IDAHO SECRETARY OF STATE 68/22/2007 65:00 CK: 7798 CT: 158818 BH: 1871875 1 8 25.88 = 25.88 ASSUM MANE # 2