

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

12 FEB -6 AM 9: 36

NOTE: See instructions on reverse befor	e filing. SECRETARY OF STATE OF IDATIO
The assumed business name which the und business is: A	ersigned use(s) in the transaction of
Blackfoot Educat	ion foundation
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
Name	Complete Address
Walter Gay	628 W 300 S Blackfoot, Td 8322
PAISU HAYS	1/3/ James St Blackfoot, Ide
Trm a m Gay 3. The general type of business transacted und	628 W 3005 Blackfoot [1 832
Retail Trade Transportation	and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: PAtsy Hays 1131 Tames 5+ Blackfoot, Id R3221	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen	Phone number (optional):
CODY IS (if other than # 4 above):	208-785-2231
	Secretary of State use only
Signature: fata, (atriature required) Printed Name: fats Hays Capacity/Title: 5ec. (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE ##################################

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