

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.

2012 DEC -6 AM 9: 08

Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE

The assumed business name which the business is:	STATE OF IDAHO undersigned use(s) in the transaction of
Middle Fork Magic	
The true name(s) and <u>business</u> address(business under the assumed business n <u>Name</u> Gayle Selisch	(es) of the entity or individual(s) doing name: <u>Complete Address</u> P.O. box 2222, Hailey ID 83333
Wholesale Trade Constructio	ion and Public Utilities on
☐ Services☐ Manufacturing☐ Mining☐ Finance, Insurance, and Real Estate	Submit Certificate of
4. The name and address to which future correspondence should be addressed: Gayle Selisch p.o. box 2222 Hailey ID 83333	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above).	ent
Signature: Pallels &	Secretary of State use only
Printed Name Gayle Selisch	
Capacity/Title: author/ owner	TEALIS APARPMANU DE
Signature:	IDAHO SECRETARY OF STATE 12/06/2012 05:00 CV: 9175 CT: 150018 DM: 158020
Printed Name:	CK: 91/5 CT: 158010 BH: 1350220 1 8 25.00 = 25.00 ASSUM NAME # 2