

CERTIFICATE OF ASSUMED BUSINESS NAME 13 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.

NOTE. See manuchons on reverse before t	a.	
The assumed business name which the under business is:	rsigned use(s) in the transaction of	!
The Horseshoe Pit		
The true name(s) and business address(es) or business under the assumed business name: Name		
Melinda M. Hadzor		
Robert S Ellisur		
3. The general type of business transacted unde	er the assumed business name is:	-
Wholesale Trade Construction	nd Public Utilities	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:	
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West	
Melinda Hadizor 3015 Hillway Ds. Borse, Idaho 83700	PO Box 83720 Boise ID 83720-0080 208 334-2301	
Name and address for this acknowledgment	t Phone number (optional):	
COPY is (if other than # 4 above):	(308) 342-6406 (308) 850-4394 (cel	ı)
	Secretary of State use only	
ignature: Melinda Hadzer capacity/Title: Partner		= 00 811353
(see instruction # 8 on back of form)	0 87983	