Capacity:

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHOLED/EFFF Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 8: 39 1. The assumed business name which the undersigned ase(s) in the Afansaction of business is: Jack's Knife & Gun 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing Retail Trade Finance, Insurance, and Real Estate **Agriculture** Wholesale Trade Mining Construction Services 4. The name and address to which future Phone number (optional): \_\_\_\_\_\_ correspondence should be addressed: Submit Certificate of **Assumed Business** Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** PO Box 83720 CODY IS (if other than # 4 above): Boise ID 83720-0080 Imerica 208 334-2301 Secretary of State use only Signature: IDAHO SECRETARY OF STATE 09/14/2001 05:00 CK: NOCHECK# CT: 151279 BH: 419129 Printed Name:

20.00 = 20.00 ASSUM NAME # 2 D48349