

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.

2007 FEB -8 AH 9: 01

SECRETARY OF STATE

NOTE: See instructions on reverse befor	e filing. STATE OF IDAHO
The assumed business name which the undersigned use(s) in the transaction of business is:	
Smiths Wild Game	Processing
2. The true name(s) and business address(es) business under the assumed business name Name Dolly M. Smith P. D. Box 337 Challis, Jd-83226	of the entity or individual(s) doing
3. The general type of business transacted und	der the assumed business name is
	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Aaron Smith 742 7th st. 90,#216 Challis Id, 83226	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmen copy is (if other than # 4 above). 	t Phone number (optional):
	Secretary of State use only
	2
Signature: Dely M. Snith	Recommendation of the second o
Printed Name: Duly M. Smith Capacity/Title: Duner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 82/08/2007 05:00 CK: 1679 CT: 209465 BH: 1031631 1 0 25.00 = 25.00 ASSUM MAME # 2
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