



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2004 APR -1 AM 8:43

Please type or print legibly.
NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Tecate Timeshares and Adventures

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
<u>Scott E. Miller</u>	<u>P.O. Box 3031 Hailey, ID. 83333</u>
_____	_____
_____	_____

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

Scott E. Miller
P.O. Box 3031
Hailey, ID. 83333

Phone number (optional):

(208) 720-6796

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature: [Signature]
(signature required)

Printed Name: Scott E. Miller

Capacity/Title: Owner / Operator

(see instruction # 8 on back of form)

Secretary of State use only

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IDAHO SECRETARY OF STATE
04/01/2004 05:00
CK: 1297 CT: 150018 BH: 736864
1 @ 25.00 = 25.00 ASSUM NAME # 2

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Revised: 11/4/2003