



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED EFFECTIVE**

2013 APR -8 PM 3: 53

SECRETARY OF STATE  
STATE OF IDAHO

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

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

Avalanche Education Specialists

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

Straw Palace ENTERPRISES  
River of No Return Brewing Company, LLC

Complete Address

PO Box 158 Challis, ID 83226

(V1108583)

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

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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

Secretary of State  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

Straw Palace Enterprises  
PO Box 158  
Challis, ID 83226

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

George D'Angelo  
PO Box 158  
Challis, ID 83226

Signature: *George D'Angelo*

Printed Name: George D'Angelo

Capacity/Title: Owner

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Capacity/Title: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
04/09/2013 05:00  
CK: 1355196 CT: 172099 BH: 1360592  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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