

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

## FILED EFFECTIVE

2014 JUL 17 AN 9: 0

submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

Instructions are included on back of application.

	manuctions are included on pack of app	ilication.
1.	The assumed business name which the undersigned use(s) in the transaction of business is:	
	HOLIDAY HIGHWAY WELL	
2.	The true name(s) and <u>business</u> address(es business under the assumed business name Name  HOLIDAY HIGHWAY HOMEOWNERS'  ASSOCIATION, INC.	
3.	The general type of business transacted un  Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	der the assumed business name is: and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed:  ROBIN TAYLOR  PO BOX 2840  KETHCUM ID 83340	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgmen copy is (if other than # 4 above):  JAMES B ZARUBICA  146 TRESURE LN  HAILEY ID 83333	t
	$\Delta$	Secretary of State use only
Signa		
Printed Name: JAMES B ZARUBICA		IDAHO SECRETARY OF STATE 07/17/2014 05:00
Capacity/Ťitle: MEMBER/ HOMEOWNER		CK:NO CK# CT:299072 BH:1433609
Signature:		16 25.00 = 25.00 ASSUM NAME #2
Printed Name:		0 100 50 1
Capacity/Title:		1) 172596

abn.pmd Rev. 07/201

9/21/2012