



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED IN EFFECTIVE

2007 FEB -1 AM 9:13

To the SECRETARY OF STATE, STATE OF IDAHO
Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name

SECRETARY OF STATE
STATE OF IDAHO

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

Ride All Year Rentals

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

Name	Complete Address
<u>Dean Johnson</u>	<u>1199 Boise Ave. SF, ID.</u>
_____	_____
_____	_____

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

4. The name and address to which future correspondence should be addressed: Phone number (optional): (208) 403-6794

Dean Johnson
1199 Boise Ave.
Idaho Falls, Idaho 83402

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

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

Signature: [Signature]

Printed Name: DEAN JOHNSON

Capacity: owner

(see instruction # 8 on back of form)

Revision 1/98
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Secretary of State use only

IDAHO SECRETARY OF STATE
02/01/2007 05:00
CK: 48575162988 CT: 158810 BH: 1838452
1 @ 25.00 = 25.00 ASSUM NAME # 2

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