



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

OCT 22 AM 8:32

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

WILD HORSE STORE & BOAT & RV STORAGE

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

RUSSELL J. CHEEVER

P.O. Box 515 Council Id. 83612

Ruth E. CHEEVER

P.O. Box 515 Council Id. 83612

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 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 | |

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

WILD HORSE STORE BOAT & RV STORAGE

P.O. Box 515

Council Id. 83612

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

Signature: Russell J. Cheever

(signature required)

Printed Name: RUSSELL J. CHEEVER

Capacity/Title: OWNER

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

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

Phone number (optional):

208-257-3339

Secretary of State use only

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Revised 07/2002

IDaho SECRETARY OF STATE
10/22/2002 05:00
CK: 2 CT: 158010 BH: 641945
1 @ 20.00 = 20.00 ASSUM NAME # 2

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