

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2004 NOV -5 AM 9: 05

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

(see instruction # 8 on back of form)

STATE OF IDAHO

<del></del>	
1. The assumed business name which the under	signed use(s) in the transaction of
business is:	
Club Eight	
	of the entity or individual(s) doing
2. The true name(s) and <u>business</u> address(es) o business under the assumed business name:	it the entity of individual(o) domig
Name	Complete Address
	109 East main st. Burky Idaha 8018 P.O. Box 181 Burky, Idaha 83319
Mich Edward	P.O. Box 181 Burky, Idelo 83318
	The account of business name is:
3. The general type of business transacted under	er the assumed business hame is.
Retail Trade Transportation a	and Public Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and <b>\$25.00</b> fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
domospondenos entrans a	Basement West PO Box 83720
Agran Jamson	Boise ID 83720-0080
P.O. Box 181	208 334-2301
Burlow, Idaho 83318	
5. Name and address for this acknowledgmen	t Phone number (optional):
copy is (if other than # 4 above):	208 802.8190
	Secretary of State use only
	72200
	DS1687
Signature: (signature required)	IDAHO SECRETARY OF STATE
Printed Name: Awon L. Jamson	IDAHO SECRETARY OF STATE  1 1/05/2004 05 = 00  CK: 6991334144 CT: 158010 BH: 7750  1 9 25.00 = 25.00 ASSUM NAME #
Capacity/Title: Oung / - manage/	NA TE EDITO - FOLIO MARE A
Capacity Inio. ( La) ( Capacity )	\ <del>5</del>