

CERTIFICATE OF ASSUMED BUSINESS NAME

submits for filing a certificate of Assumed Business Name.

ASSUMED BUSINESS NAME
Pursuant to Section 53-504, Idaho Code, the undersigned

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2014 APR -8 PM 2: 28

SECRETARY OF STATE STATE OF IDAHO

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

The assumed business name which the business is: The Office Staff	e undersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address business under the assumed business Name G&M Adventures LLC (W67823)	
÷ .	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: The Office Staff 5114 W. Emerald St. Ste E Boise Vd \$3706	Occident of Clare
5. Name and address for this acknowledge copy is (if other than #4 above):	_
Signature: Michelle Kingsmore	Secretary of State use only
	-
Capacity/Title: Member	
Signature:	IDAHO SECRETARY OF STATE 94/98/2914 95:99
Printed Name:	CK: 5972 CT: 107214 BH: 1419283 1 8 25.88 = 25.88 ASSUM NAME # 2
Capacity/Title:	- 10.0

abn.pmd Rev.07/2010 017.03.04