CERTIFICATE OF ASSUMED BUSINESS NA Pursuant to Section 53-504, Idaho Code, the under submits for filing a certificate of Assumed Busines <u>Please type or print legibly.</u> Instructions are included on back of application	ersigned II DEC -5 AN 9:27 SECRETARY OF A
 The assumed business name which the undersignation business is: 	gned use(s) in the transaction of
REMAX ALL SEA	SONS
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: <u>Name</u> <u>All Seasons LLC</u> <u>509 N</u> <u>(W56640)</u>	ne entity or individual(s) doing <u>Complete Address</u> North Fifth Avenue,Ste E,Sandpoint,1D 83864
 3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Wholesale Trade Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: 	Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street
509 North Fifth Ave.,Ste.E,Sandpoint,ID 83864	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: Paule Caup	Secretary of State use only
Printed Name: Paula Kamp Capacity/Title: Owner/Member Signature: Autout Printed Name: Randall Franz Capacity/Title: Broker/Member	IDAHO SECRETARY OF STATE 12/06/2011 05:00 CK: 8382 CT: 255111 BH: 1308491 1 8 25.08 = 25.00 ASSUM WATE # 3 15/7737